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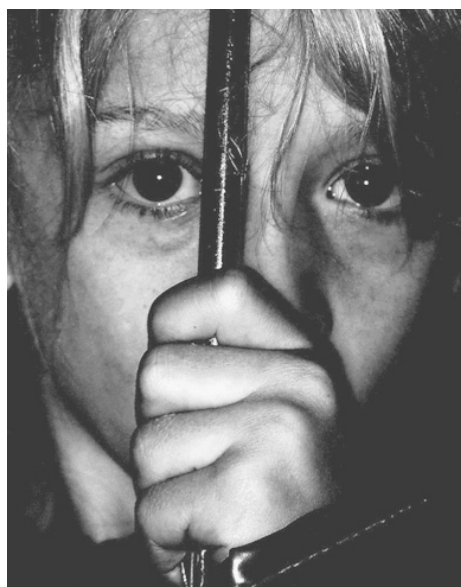
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*"Once I saw my father actually get arrested. I was about 6 or 7....As police clipped those silver bracelets on him, tears ran down my face....I wanted to jump in and help free my father, but all I could do was stand there, not moving an inch....My uncle came after me to make sure I didn't do anything stupid, like chase after my father" (Garcia, 2003, p. 48).*

*"When my mother was sentenced, I felt that I was sentenced....She was sentenced to prison – to be away from her kids and her family. I was sentenced, as a child, to be without my mother" (Antoinette, cited in Allard & Lu, 2006, p. 1).*

## Incidence

Nationwide, more than 2 million children have a parent who is incarcerated in state and federal prisons and local jails (U.S. Department of Justice, 2007). Since 1991, the number has increased by more than 50%. There were approximately 500,000 children with incarcerated parents in 1991 (Lee, 2007). Most of these children have an incarcerated father, but a growing number – 8% currently – have a mother who is incarcerated (Federal Resource Center for Children of Prisoners, 2007). Nationwide, about one child in 40 had an incarcerated father in 1998, while one child in 360 had an incarcerated mother (BJS, 2000).

# Children of Incarcerated Parents

The population of imprisoned people is growing. Currently, 1 in 142 adults in the United States is in prison or jail (Lee, 2007). There are more prisoners in the United States than farmers (Calhoun, Goode & Scott, 2005). The female inmate population has more than tripled since 1985 (Calhoun et al., 2005). About 55% of parents in state prison report having a minor child and 32% report having more than one minor child. These prisoners collectively have over 2 million children.

Approximately 1 in 32 adults in the United States is under some form of correctional supervision. This figure includes those in jail, in prison, and those on probation and parole. Women comprise about 23% of the nation's probationers – up from 21% in 1995 – and they are 12% of parolees. Adults who are under some form of correctional supervision are parents of close to 7 million children. This figure includes the 2 million children whose parents are actually incarcerated. Thus, parents under community correction have approximately 5 million children (BJS, 2003, reported in Lee, 2007; BJS, 2005, reported in Arditti & Few).

Some incarcerated parents lived with their children prior to the arrest and were the active caretakers. Others have never lived with their children. Some may have lived with their children in the past but not at the time of the arrest. About 45% of parents in State prisons were living with their minor children at the time of their incarceration (Mumola, 2000; [www.ojp.usdoj.gov/](http://www.ojp.usdoj.gov/)). This figure is similar to what researchers have found. For example, in Lange's sample (2001), only 30% of incarcerated fathers had lived in the same household as their children within the year prior to the arrest. Those residing in the same household may not have had day-to-day responsibility or a strong parenting role prior to incarceration.

## What Do We Know About the Children?

Children with parents who are incarcerated are an invisible population. No one agency is responsible for them and there is no information collected on these children in a systematic fashion (Jucovy, 2003; Timmons, 2005; Wright & Seymour, 2000).

The Urban Institute (2003, reported in Lee, 2007; [www.cwla.org](http://www.cwla.org)) found that the ages of the children of incarcerated parents were spread. About 2% were under a year; 20% were ages 1 to 4 years; 36% were ages 5 to 9 years; 28% were ages 10 to 14 years; and 14% were ages 15 to 17 years.

## Impact

The impact of having a parent incarcerated depends upon many factors. They include whether or not the child was in contact with the parent prior to the incarceration; the age of the child when the separation occurred if the parent was in the home; the length of the separation; the general health of the family; the relationship between the parent and the child prior to the incarceration; the availability of community support; and the degree of stigma the child feels due to the parent's crimes.

It is believed that the incarceration of mothers may have more negative impact, as mothers are more likely than fathers to be the primary caregivers and are more likely to have been living with their children at the time of arrest. Thus, children with incarcerated mothers are more likely to need placement in kinship or foster care (studies cited in Arditti, 2007; studies cited in Bush-Baskette & Patino, 2004; Koban, 1983; studies cited in Myers et al., 1999).

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## Children of Incarcerated Parents

*continued from page 1*

It is possible that the child will have no change in caretakers. Some children were not living with the parent who is now incarcerated, but were living with the other parent, were already in foster care, or were already being raised by a relative. Other children will be displaced. Again, there are few sources of data to indicate how many children must move when a parent goes to jail or whether the move is to a more stable or less stable environment. One data source (Combined Child Welfare and Corrections Data, 2002, cited in CIPP, 2002) found that 40% of children in Oregon's foster care system had at least one parent who was or had been involved in the criminal justice system, but it is not known how many children entered foster care prior to their parent's incarceration and how many entered as a result of their parent's arrest.

### Risks

Children of incarcerated parents may have been an at-risk population prior to their parent's arrest (studies cited in Myers et al., 1999; Neto & Bainer, 1983). Some children with incarcerated parents have been exposed to criminal activity. The majority of inmate parents have been in prison before (Mumola, 2000; Neto & Bainer, 1983), and children may be experiencing severe disappointment that their parent was unable to maintain legal behaviors. Since the majority of women in prison have a history of substance abuse or addiction, some children may have been affected by prenatal exposure to substances in addition to the effects of living with and witnessing substance abuse (studies cited in Myers et al., 1999). Some children of incarcerated parents have been victims of maltreatment and abuse by the parent or paramour of the parent.

Studies on children of incarcerated parents are limited in number. Available data is often based upon parent or caregiver interviews

rather than child interviews or direct observations of the children. Studies typically do not account for the child's environment and condition prior to the incarceration of the parent. Most studies do not provide a comparison between children whose parent is apprehended and imprisoned versus children who continue to live with a parent who is involved in criminal activity. Also lacking are longitudinal studies that follow the children over time.

As mentioned earlier, according to U.S. Department of Justice statistics (2007), three out of every four convicted jail inmates were alcohol or drug-involved at the time of their current offense (Lee, 2007). Since many parents who are incarcerated have substance abuse disorders, it is not surprising that their children also have an increased long-term risk for substance abuse (Federal Resource Center for Children of Prisoners, 2007). There are many additional risks for children whose parents have substance use disorders. Prior issues of VCPN (see volumes 16, 33, 53, and 79) have examined the numerous risks to children of substance-abusing parents.

Several researchers have noted a strong connection between parental incarceration and their children developing delinquency and being incarcerated (CIPP, 2002; Federal Resource Center for Children of Prisoners, 2007; Kemper & Riverra, 1993). Murray and Farrington (2005) found that parental imprisonment predicted male children's antisocial and delinquent behavior. For example, 48% of boys who were separated from their parents between birth and age 10 due to the parent's incarceration were convicted of criminal activity as an adult, compared to 25% of boys who were separated from a parent for other reasons (Murray, 2007). Trice and Brewster (2004), studying 58 Virginia youth whose mothers were incarcerated, found that 38% had been arrested during the prior year compared to a 15% arrest rate in a comparison group of the youth's best friends and a state juvenile arrest rate of 9% for similarly-aged peers. Statistics on offenders incarcerated in 2002 showed that 46% had a family member who had been incarcerated (U.S. Department of Justice, 2007).

It would be exceptional for a family to experience incarceration in the absence of other difficulties. Wright and Seymour (2000) discuss the concept of accumulation of risk and acknowledge that it is likely impossible to attribute children's difficulties after a parent's incarceration to the incarceration event. Rather, the totality of the child's experiences, both prior to and after the parent's incarceration, must be considered. Since children's circumstances vary, a unique array of risk factors exist for each child. As with any other population, the accumulation of risk factors has a negative impact. The greater the number of risk factors, the greater the likelihood of a negative outcome.

Mackintosh, Myers & Kennon (2006) studied children between the ages of 6 and 12 who attended a Virginia camp for children of in-

carcerated parents. Of the 69 children, 60% reported four or more serious life stresses over the past year from a list of 16. The range was 0 to 11 stressors. The most common were having to move (34%), a change in schools (36%), and 45% had a new baby join the family. Serious illness, injury, or hospitalization of a family member happened to 61% and 51% experienced a death in the family. Witnessing violent events was not uncommon with 36% reporting they had seen someone beaten or shot; 27% were unable to play outside because the neighborhood was unsafe; and 25% had to hide from gun shots.

### Coping

The little information available indicates that coping by children whose parents are incarcerated is spread throughout a continuum. Some children have access to substantial support and are managing fairly well, others are barely coping, and still others are in grave danger (Federal Resource Center for Children of Prisoners, 2007).

Children feel confused and abandoned by a parent's absence (Myers et al., 1999). They are diverted from developmental tasks when they are stressed. Children with incarcerated parents are at risk for emotional and behavioral difficulties, including withdrawal, aggression, anxiety, and depression. Classroom behavioral difficulties and a drop in academic performance is not unusual (Jucovy, 2003; Lee, 2007). For example, in a study of 75 mothers and their children, Stanton (1980) found that children whose mothers were in jail were performing academically at low or below-average levels in disproportionate numbers when compared to children whose mothers were on probation. Teachers emphasized the noticeable behavioral extremes in the children whose mothers were in jail. Most of the behavioral difficulties of the children had been evident prior to the mother's incarceration. In some cases, the child's behavior and academic status improved after the mother's incarceration due to an improved family environment.

Trice and Brewster (2004) studied a sample of 58 adolescents between 13 and 20 whose mothers were incarcerated in state prisons in Virginia. They found that the youth with incarcerated mothers were four times more likely to be suspended, three times more likely to have significant truancy, and more than four times more likely to be failing academically when compared to a control group of their best friends. The 35% rate of school drop out for children of incarcerated mothers compared unfavorably to the 9% national drop out rate and the 7% drop out rate in the best friend comparison group.

In contrast, a recent dissertation (Naudeau, 2005) examined the impact of parental incarceration on the development of 54 sixth-grade youth. Findings were that when variables were controlled, parental incarceration was not related to increased problem behaviors in



youth or to lower scores on character measures, although there was more variance in the children with incarcerated parents than with the comparison children.

Children suffer stigma when a parent is incarcerated. Stigma can be everywhere – in the community, among peers, and even within the extended family. Suzanne Kennon, a former inmate who now works for the Virginia Department of Correctional Education, comments, “So many inmates and caregivers don’t know what to say to children. We tell them we are in school or away working or living across the country. When they finally learn the truth, the children are told not to tell anyone. Then someone at school calls the parent a ‘jailbird’ or a ‘crack head’ and then there’s a fight. The most important thing for children is their friends and the kids from the nicer homes won’t associate with them if they know that the parent is in prison,” Kennon relates. The stigma causes feelings of shame and low self-esteem.

Children may change their reactions to a parent’s incarceration as they age. Younger children appear to be at greater risk for trauma-related reactions, disorganized behaviors, and disruption in bonding. Older children seem to be at greater risk for acting-out behaviors (conduct disorders; gang activity; truancy; substance abuse) (Johnson, 1992, cited in Wright & Seymour, 2000; Lee, 2007).

Beyond these broader findings about vulnerability, young people with an incarcerated parent identify an array of needs specific to their parent’s situation. According to the San Francisco Partnership for Incarcerated Parents (2007), children want to know the truth about their parent’s situation. Children need someone to listen to them without judging. They need the companionship of other children who share their circumstances, so they don’t feel alone. They need to have their relationship with their parent valued. Rather than experience stigmatization for their parent’s actions,

children need to be treated with respect, offered opportunity, and recognized as having potential.

Mentors and therapists have found that children of incarcerated parents have a multitude of emotions. They may fear being abandoned and never seeing their parent again. They may worry about the safety and treatment of their parent. Sadness and depression are common feelings, as is confusion. Some children feel responsible for their parent’s behavior. They believe if the parent loved them enough, then the crimes would not have happened. If they were worthy, their parent would change. They feel both love and anger towards their parent. Their anger is often disguised in acting out (Jucovy, 2003; Lee, 2007; Slavin, 2004).

### Resilient Children

There are a few studies aimed at learning about children who are resilient. Hagen, Myers, and Mackintosh (2005) investigated the interactions between stress, support, a hopeful attitude, and behavioral problems in a sample of 65 children with incarcerated mothers. Children with low levels of hope had both internalizing and externalizing problems. Children who felt they had little social support had greater externalizing problems while children with higher life stress reported more internalizing problems. The authors concluded that being confident in one’s ability to overcome challenges and having a positive outlook function as protective factors while being less hopeful may place a child at risk of developing adjustment problems.

Contact with the incarcerated parent also correlated with resiliency in a study by Trice and Brewster of 58 Virginia youth (2004). Those with regular and frequent contact with their incarcerated mothers were the most successful and those with low or no contact the least successful in maintaining academic performance and positive behaviors.

An investigation of 69 children ages 6 to 12 and 25 of their caregivers (Mackintosh, Meyers & Kennon, 2006) found that it is critically important for children with an incarcerated parent to live in a home where they feel loved and accepted. Children who felt rejected (whether or not they actually were rejected) self-reported high levels of problems. Children with fewer life stresses and who felt higher acceptance had fewer externalizing and internalizing problems. The researchers note that these correlations are bidirectional. Caretakers may feel higher acceptance towards children with fewer problems. Still, high stress levels predicted less acceptance and greater problem behaviors.

### Goals for Interventions

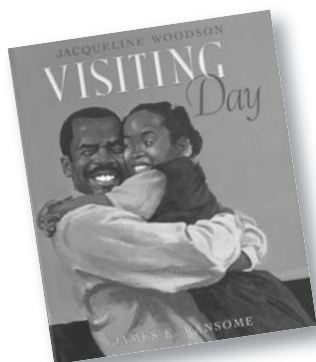
Interventions and supports for children whose parents are incarcerated can be aimed at several goals (Timmons, 2005). These can include:

- Breaking the cycle of incarceration within the family;
- Providing a safe and secure environment for the child;
- Helping the child deal with the trauma of losing a parent (the parent is “alive but unreachable”);
- Teaching the child ways to deal with shame and inner suffering;
- To avoid offering false hope;
- To have the child keep in contact with the parent where feasible;
- To have the parent and child reunite when this would benefit the child.

### Interventions

While the research literature on interventions is scant, a few preliminary concepts have been suggested. According to Busch-Baskette & Patino (2004), effective programs

*continued on page 5*



### **Visiting Day**, by Jacqueline Woodson, 2002, 32 pages, \$16.99 (hard).

Available from: Scholastic Press, 557 Broadway, New York, NY 10012, Web site: [www.scholastic.com](http://www.scholastic.com)

*This exceptionally well-written book offers a preschool child's view of visiting her father in prison. The girl (who is never named) tells about waking on visiting day to the sound of her grandmother frying chicken. As they prepared to leave, she envisions her father getting ready to visit them. A neighbor stops by with packages for her son who is also at the prison. Grandma and the little girl board the bus and make the long trip. The little girl enjoys telling her father everything that has happened over the month. They look forward to when life will be different and he will be home. After the long trip back, the little girl follows her grandmother's advice to "count our blessings and love each other up and make biscuits and cakes and pretty pictures to send to Daddy."*

*The vibrant but realistic illustrations by James E. Ransome will reassure a timid child who worries about visiting. It is easy to identify with the little girl and her grandmother. The author based the story on her memories of visiting her favorite uncle who was in prison. The illustrator also drew from personal experiences. The result is a sensitive, positive story that reaches out to young children in kinship care.*

### **My Daddy is in Jail** by Janet M. Bender M. Ed., 2003, 53 pages.

Available from: Youth Light, Inc., PO Box 115, Chapin, SC 29036 (800) 209-9774 or (803) 345-1070, FAX: (803) 345-0888, E-mail: [yl@sc.rr.com](mailto:yl@sc.rr.com)  
Web site: [www.youthlight.com](http://www.youthlight.com)

*Written by a retired elementary school counselor, My Daddy is in Jail is an excellent resource for therapists. It is more than a story. The introduction orients the counselor to the needs of children with incarcerated parents and offers ideas about how to use the book. Each page of the story contains a discussion guide with questions for discussion and facilitator comments. The last part of the book offers 8 sessions of optional small group activities.*





## Spotlight: All God's Children Camp

One of Virginia's most successful programs for children of incarcerated parents is the All God's Children Camp provided by the Virginia Conference United Methodist Church. The program is designed to give children of incarcerated mothers an opportunity to have a positive experience through a week-long camp.

The camping ministry is a program for children ages 7-12 who attend a week-long overnight camp at one of the following locations: Camp Alta Mons in Shawsville; Camp Highroad in Middleburg; Westview on the James in Goochland; and Occohannock on the Bay in Belle Haven. There is a fall weekend camp as well in the Harrisonburg area at Camp Overlook in Keezletown. The All God's Children Camp was created in 1999 and completed its ninth year this past summer. It has expanded from one week at one location to four weeks at four different locations. Approximately 200 children from throughout the Commonwealth participate each year.

The camp experience serves as a "getaway" for the children, providing them with a space where they can forget about daily stresses and issues that arise from having an incarcerated parent. These stresses include poverty, changing living environments, low self-esteem and lack of confidence. The children participate in numerous activities including swimming, hiking, arts and crafts, music, and Bible study. According to Ann Davis, Virginia Conference Director of Children's Ministries and Discipleship, the activities at the camps "provide the children with the chance to have fun and meet other children of incarcerated mothers" as well as providing caring adult mentors.

In order to operate the camp it is necessary to have enthusiastic volunteers. The volunteers

provide assistance at the camp and act as positive role models for the children. The volunteers are recruited from a number of different churches across Virginia. They spend the entire week with the children at camp, and then agree to keep contact with one child for a minimum of one year after the camp week has ended.

All God's Children Camp is funded by donations from churches in the Virginia Conference United Methodist Church along with individual donations. The cost of the program for one camper is \$300 and families are asked to pay a \$10 registration fee. The scholarships to attend the program, transportation, and supplies needed for activities are all provided by the churches in the conference.

The registration of the children is the responsibility of Assisting Families of Inmates (AFOI). Fran Bolin, executive director of AFOI explains that they handle the logistics of the program, which includes receiving registration forms, organizing the children into which week they will attend, and enrolling the children into the program.

Davis notes that the program provides "respite for the caregivers," offering them a break from their usual hectic lives raising the children. She



mentions, "We receive positive responses from the children, most of whom can't wait to come back every year." The incarcerated mothers of the children are especially appreciative of the program. The volunteer mentors are encouraged to have contact after the camp week to update the mothers on their children's experience at camp. Davis is familiar with a particular instance



where the mother was so inspired by her daughter's leadership at camp that she decided to enroll in a Bible study class at her prison.

The future plans for the program are to continue with the four summer camp sessions. The emphasis in the future, according to Davis, is to consider ways to expand or structure the mentoring that happens during the school year. This year an Easter party was held for the children in the Richmond area. There are plans to have other "reunion" events for the campers, caregivers and families in other regions of the conference as well.

Davis emphasizes that the purpose of All God's children Camp is to have the children "realize that they are someone of worth." Besides all the fun activities, there is time that focuses on conquering issues such as conflict management, peer mediating, self-respect, and confidence. Davis hopes that the week at camp and communication between the mentor and the child throughout the school year will encourage the children to make better decisions and simply know that they have someone to talk to and someone who cares.

More information is available from Ann Davis, Virginia Conference Director of Children's Ministries and Discipleship, 10330 Staples Mill Road, PO Box 1719, Glen Allen VA 23060. Contact her at 800-768-6040 extension 138, or email at [AnnDavis@vaumc.org](mailto:AnnDavis@vaumc.org). Visit the Virginia Conference website at [www.vaumc.org/](http://www.vaumc.org/), then Resources, then Camps, then All God's Children Camps.

### ***When a Parent Goes to Jail: A Comprehensive Guide for Counseling Children of Incarcerated Parents***, by Rebecca M. Yaffe, M.Ed.

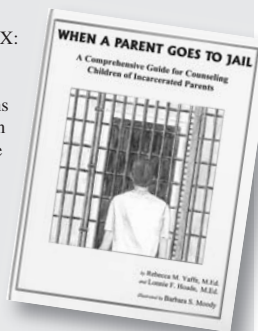
& Lonnie F. Hoade, 2000, 45 pages, \$49.95 plus shipping (hard).

Available from: Rayve Productions, POB 726, Windsor, CA 95492 (800) 852-4890, FAX: (707) 838-2220, Web site: [www.rayvepro.com](http://www.rayvepro.com)

Children often relate well to a story. This book explains to young children what happens when a parent is arrested and goes to jail. It discusses the process of visiting a parent in prison and describes ways that parents and children can remain in contact. It ends with some of the feelings and changes that occur when a parent rejoins the family.

The story line chosen is a child who is living with the parent prior to the arrest and who remains with the other parent. It does not discuss situations where a child was not living with the incarcerated parent or where a single parent is arrested and the child must move in with relatives or foster parents.

The book is well-written by experienced Virginia counselors and illustrated by an award-winning Virginia artist, Barbara S. Moody. The book offers valuable information in a gentle fashion to elementary-aged children. The 46 color illustrations will capture children's attention and help them remember the main themes. A workbook is also available for \$29.95.



*Special  
Thanks to  
Ann Loper, Ph.D.  
who contributed  
greatly to this  
issue of VCPN.*



# Children of Incarcerated Parents

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need to be flexible enough to address needs of individual families. Successful interventions will offer multiple services. The greatest likelihood of permanent change occurs when programs offer services to both the children and their caretakers and to the parents. An important component of successful programs is promoting contact between parents and children.

## Arrest Practices

A parent's arrest can be a traumatic event for a child. A national study in 1998 (Phillips, cited in CIPP, 2002) estimated that: 67% of arrested parents were handcuffed in front of children; weapons were drawn in 27% of arrests; there was a physical struggle in 4.3%; and pepper spray was used in 3.2%. Others have offered a more modest estimate. Covington (1995, cited in CIPP, 2002) estimated that about 20% of children witnessed their parent's arrest.

A child's immediate reaction to witnessing arrest may include feelings of helplessness, bitterness, and anger (Wright & Seymour, 2000). Trauma due to a parent's arrest can occur in other ways. Older children, for example, might return home to an empty apartment and not know what has become of their parent.

Suggestions for intervention at the stage of arrest include training for police officers about the needs and perceptions of children and creating guidelines for officer procedures. The goal is for police to minimize the trauma for the children and to provide a sense of security and positive authority (CIPP, 2002; McGowan & Blumenthal, 1978).

Some police departments have toys available and a comfortable waiting area for the child until a relative or child protective services arrives. Allowing the parent time to say goodbye to the child can reduce trauma (Wright & Seymour, 2000). If the children are at school, the police can notify school authorities. The school resource officer or guidance counselor can inform the children and assist in arranging for their care.

At minimum, part of the arrest protocol can be asking the parent about minor children and their whereabouts. While a parent may refuse to share the information, routine inquiry could minimize the chance that children will return to an empty home or be stranded at a sitter's home (San Francisco Partnership for Incarcerated Parents, 2007).

## Child Placement

When a child's mother is arrested, it can be difficult to find an appropriate placement immediately. It is usual for children of incarcerated mothers to experience two or more changes of caregivers while the mother is in jail (CIPP, 2002). Child welfare workers may be involved in the placement decisions. It is suggested that the arrested parent be considered as the first source of information about potential caretakers for their children (San Francisco Partnership for Incarcerated Parents, 2007; Wright & Seymour, 2000).

Family members are preferred caretakers, if they are willing and suitable. The available data document that few children of incarcerated parents are in foster care. According to the San Francisco Partnership for Incarcerated Parents (2007) about 10% of prisoners' children will spend time in foster care, while the vast majority find homes with family or friends.

Lee (2007) estimates that between 2% and 10% are in foster care (about 29,000 children total). Of those with a father who is incarcerated, 90% live with their mother. (In fact, many of the fathers were not living with their children at the time of their arrest.) Of those with an incarcerated mother, half live with a grandparent who is usually the grandmother (Lee, 2007). A fourth to a third live with their fathers and most of the rest live with other relatives (Wright & Seymour, 2000). The article on kinship care (this issue) explores some of the challenges and options for relatives who are providing care for children while the child's parent(s) is incarcerated.

As much as possible, older children should be allowed input into placement decisions. At a time when their life is out-of-control and frightening, children need someone to listen to their concerns. Also, children may have information about who in the family system they trust as a caretaker. Simply voicing their concerns may alleviate any feelings of insignificance and alienation (San Francisco Partnership for Incarcerated Parents, 2007).

## Sentencing Considerations

In Marion County, Oregon, "Project Bond" allows a defendant who is pregnant or who has children under age 24 months to enter a diversion program rather than serve time in jail. In another Oregon jurisdiction, Multnomah County, an offender's active parenting status is part of the pre-sentencing data presented to the judge. Two other Oregon locations, Deschutes County and Jackson County have implemented an Integrated Family Court

Model. The model seeks to address the needs of the entire family by bringing together all service providers to create a cohesive plan for the defendant that strives to accommodate the needs of the entire family (CIPP, 2002).

A jail term may mean that the parent is housed in a distant location. According to the U.S. Department of Justice Bureau of Justice Statistics (2007), 62% of parents in State prisons report being held over 100 miles from their home. Many of these facilities are inaccessible by public transportation.

## Programs for Incarcerated Parents

Parents who are incarcerated have a diverse and serious grouping of problems. As mentioned before, many have substance use disorders. According to research cited by Lee (2007), 85% of incarcerated parents report drug use prior to incarceration and 65% of incarcerated women report using drugs regularly. Mental illness is present in 23% of incarcerated mothers. Parents in prison have histories of abuse and family instability with 60% of incarcerated mothers reporting a history of being a child victim of physical or sexual abuse. Many spent time in foster care themselves (17% of men and 20% of women). Most prisoners' difficulties are compounded by poverty.

Prisons offer a wide variety of interventions, including substance abuse treatment and employment training. Space does not permit discussion of these more general efforts although there is some information in Virginia's Picture (this issue) and in the Spotlights.

States are beginning to provide parenting support groups and parent training for parents who are incarcerated. Some of the programs extend beyond the classroom and attempt to assist parents to stay informed about their children.

Parent support groups have a different focus than parent education. Support groups are aimed at offering the emotional support that parents need, rather than focusing on education and skill development. Parent education is often time-limited (a 16-week course, for example) whereas parent support groups are ongoing and available as long as desired or needed. Some facilities offer both parent education and parent support groups. See the Spotlights, this issue, for a description of programs.

Group or individual therapy can supplement parenting programs. Some authors recommend cognitive-behavioral therapies and concepts from Solution-Focused Brief Group Therapy, as they appear more effective than insight-oriented and non-directive therapies (Lange, 2001).

The FRCCP (2007) recommends that prison parent support services include parent education classes, parent support groups, and family counseling. It is important that these services be offered by staff members who are

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trained professionally and who are knowledgeable about family dynamics. Staff could be either community members or corrections employees.

### Visitation Programs

Visitation and contact between an inmate and children can vary substantially. A recent study of 51 incarcerated fathers (Arditti, Smock & Parkman, 2005) found similar findings to national data. Fifty-one percent reported no visits with their children. Some had weekly (37%) or monthly (21%) telephone conversations with their children.

According to data collected by the Oregon Department of Correction in 2000 (reported in CIPP, 2002), 57% of women and 48% of men who are incarcerated expect to be united with their children after release. At the same time, half of the mothers and 70% of the fathers had no visits from their children; 15% of mothers and 40% of fathers had no phone contact; 30% of the mothers and 40% of the fathers had received no letters from children; and 8% of mothers and 20% of fathers had had no contact whatsoever with their children since entering the correctional system. There are additional formidable challenges to maintaining contact with children since 48% of parents in State prisons report having sentences of at least 10 years ([www.ojp.usdoj.gov/](http://www.ojp.usdoj.gov/)).

Visits allow children to express their emotions and to picture their parent's situation realistically. This can relieve irrational fantasies and fears about where the parent is and how he/she is faring. Visits also allow children to maintain a relationship with their parent (Myers et al., 1999). Children need to know that their parent did not voluntarily abandon them and that the parent misses them (Wright & Seymour, 2000). Visits have positive results for parents as well. Tuerk and Loper (2006) documented that higher contact between children and incarcerated mothers resulted in reduced levels of parenting stress. According to a review by Hairston (2002), prisoners who retain strong family ties during imprisonment have higher rates of post-release success.

Jails and prisons are designed for security. They are not child-friendly and may even be terrifying for small children. Visiting a parent through a glass partition and using a telephone to speak can be daunting. Children may live far from the facility housing their parent and transportation may not be reliable. Visiting hours may be brief and scheduled at incon-

venient times. Further, gas is expensive and transportation may be costly, taking money needed for basics. The long trips and waiting time to see a parent may mean that the child misses social activities at church or recreational centers. Foregoing these skill-building activities and times of relating to friends can be a large sacrifice for a child and can even negatively impact his or her development (Arditti, 2007).

Caregivers may be discouraged from taking children for visits due to negative reactions after visitation. Conversely, caregivers may continue to take children to visits even if the child does not want to go or in spite of negative reactions. Lack of visitation or inconsistent visitation can make reunification more difficult for the parent and child.

Visitation with an incarcerated parent is not always in the child's best interests. However, for many children, visitation can be beneficial. If visitation is to occur, there are many practices that can improve the quality of visits.

The Federal Resource Center for Children of Prisoners (FRCCP, 2007) has made some recommendations for visiting schedules. The Center recommends that children and their incarcerated parents should be permitted, at minimum, weekly visits. They stress that visiting schedules should be flexible, allowing for weekday, weekend, and evening visits, as well as opportunities for more extended visits, such as overnight or daylong.

FRCCP suggests that child-centered, supervised visitation areas be established and maintained in all prisons. Provision of books, toys, games and activities is recommended. Some facilities have established child visitation programs. Several of these programs are described in the Spotlights, this issue.

### Programs for Children in their Communities

Children are generally traumatized by separation from caregivers, regardless of the cause of the separation. Be it war, death, divorce, military service, incapacity, or incarceration that is the cause of the separation, research documents the negative impacts (Wright & Seymour, 2000).

In general, intervention is more effective if it is offered early, before maladaptive patterns form and become habits. Programs that help children connect with skill-building activities and offer respite and assistance to caregivers can help. VCPN has spotlighted numerous exemplary programs in this issue.

### Mentoring

Mentors can support children with a variety of needs. VCPN has reported in prior issues on mentoring services for children (see especially, volumes 4, 35, 56, 66, and 79). Attention towards developing mentoring services for children of incarcerated parents is fairly new. As discussed previously, children of incarcerated parents not only experience

stigma due to their parent's crime, but they also may fear for their parent's safety. Many suffer from post-traumatic stress and may have flashbacks to the parent's crime or the arrest. The children may feel that they "do the time" along with their parent (San Francisco Partnership for Incarcerated Parents, 2007; Slavin, 2004). While mentoring alone is not sufficient support, mentors can help.

Mentors and counselors can help a child deal with strong feelings. Children need to learn that they are not judged by their parent's problems. Children need reassurance that their parent can make a serious mistake but still remain a good parent.

Mentors, therapists, foster parents and family can enhance the child's protective factors. Protective factors mitigate the risk of negative outcomes. Children are less at risk if they are attached to their school and performing well academically. Risk lowers if children are involved in skill-building activities and have a strong and positive group of friends. Connections to a faith-based group and a strong spiritual life will enhance the child's resilience. Self-confidence, an acceptance of what can not be changed, and a sense of humor will protect the child. Perhaps most important is the knowledge that someone believes in them and is committed to seeing them (Lee, 2007).

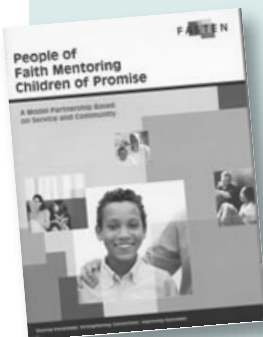
While not specific to children of incarcerated parents, research in the 1990's involving mentoring of at-risk youth by Big Brothers Big Sisters of America suggested that a mentor who was consistent and caring could reduce the likelihood of youth initiating use of drugs and alcohol, improve school performance and attendance, and reduce instances of violence (study cited in Jucovy, 2003 and in Calhoun, et al., 2005). Studies on mentoring show positive effects when the programs are carefully planned and administered and when they screen, train, monitor, and support mentors in the development of solid, lasting relationships with the children (studies cited in Calhoun, et al., 2005).

Effective mentoring depends on program design and implementation. While the basic concept is straightforward, the implementation is not (Goode & Smith, 2005). There must be ongoing recruitment efforts for volunteers. Mentors need proper training. Matching mentors and children is a crucial component. Mentors also require ongoing supervision and support. Involving the family can make mentoring more effective. Family members are more likely to reinforce the mentor's influence if the family is involved with the mentor and is consulted.

Jucovy (2003) found that the length of time the mentor is involved is also crucial. There were no positive impacts shown in relationships lasting less than 6 months and few changes until the relationship had been consistent for a year or more. Children who feel abandoned by their parent do better if a mentor can make a longer commitment (Slavin,

*continued on page 8*





## **People of Faith Mentoring Children of Promise: A Model Partnership Based on Service and Community**, by John A. Calhoun, Rev. W. Wilson Goode, Sr., and Rev. Mark V. Scott, January, 2004 (reprinted February, 2005), 64 pages, \$15.95, ISBN 1-929888-34-1

Available from: National Crime Prevention Council, 2345 Crystal Drive, Arlington, VA, 22202, (202) 466-6272, FAX: 202-296-1356, orders: (800) 627-2911 or outside the USA call 518-843-8161 Web site: [www.npc.org](http://www.npc.org)

This publication has a lofty purpose. It aims to "help propel a movement to dramatically reduce prison populations, prevent crime, and improve communities. Ultimately the goal is to save lives." The major partners in the effort are the National Crime Prevention Council, Public/Private Ventures, the Amachi Program, and the Pew Charitable Trusts. The partners believe they have identified a model that will help meet that goal. This publication shares the lessons learned during the development and implementation of this highly effective mentoring program. It provides guidelines for community leaders who are interested in starting similar initiatives. The four-phase model includes: planning; recruitment; implementation; and monitoring and evaluation. Each step is discussed in detail. The Appendix has sample forms. Those who choose to take the incarceration of a child's parent as a point of intervention will find this guide invaluable. There is also a 26-page Mentor's Guide (Item # M96, ISBN # 1-59686-000-6) available at \$7.95.

## **Handbook for Mentors**, 2003, (46 pages) and **Developing a School-Based Mentor Program**, 2003, Virginia Department of Education, 98 pages, free of charge.

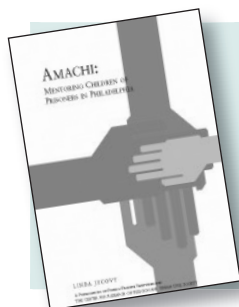
Available from: Virginia Department of Education, Division of Special Education and Student Services, Office of Student Services, Attention: Arlene Cundiff, P.O. Box 2120, Richmond, VA 23218-2120 (804) 225-2871 E-mail: [Arlene.Cundiff@doe.virginia.gov](mailto:Arlene.Cundiff@doe.virginia.gov)

The authors believe that a caring relationship between a responsible adult and a young person can strengthen that young person's ability to resist self-destructive behavior (use of drugs or alcohol) and socially destructive behavior (crime or violence) as well as provide skills to succeed in school.

**Developing a School-Based Mentor Program** is divided into four parts: Part One gives an overview of mentoring with details about the benefits and challenges of mentor programs. Part Two examines the first steps in developing a school-based mentor program. This section discusses committees, program mission and goals, and finding resources. Part Three reviews program administration including staffing, program policies, risk management, funding, and evaluation tools. Part Four explores the program processes involved in school-based mentor programs. These include mentor recruitment, screening, orientation and training, referral, matching, parent involvement, support, supervision, and recognition. Appendices contain forms needed to develop and implement this program.

This publication is easy to understand and would be useful for schools that are interested in developing a school-based mentor program. However, no evidence-based research has been done on the effectiveness of this program.

**Handbook for Mentors** is a guide for those who have become mentors in the Communities In Schools (CIS) of Chesterfield Mentoring Program. This handbook is divided into three sections. The first section provides basic information about mentoring: what it is; how it benefits the student and the mentor; how to develop a mentoring relationship with a student; and ideas for activities for mentors and students. The second section discusses the skills that are necessary for effective mentoring, such as listening and communication skills and goal setting techniques. The final section explores the policies and procedures of Communities In Schools program.



## **Building From the Ground Up: Creating Effective Programs to Mentor Children of Prisoners: The Amachi Model**, by W. Wilson Goode, Sr. & Thomas J. Smith, 2005, 46 pages.

Available from: Public/Private Ventures, 200 Market Street, Suite 600, Philadelphia, PA 19103 (215) 557-4400, FAX: (212) 557-4469, Web site: <http://www.ppv.org>

This informative manual describes the Amachi model, a collaborative effort to assist children of incarcerated parents. The model has been implemented in 101 cities in 38 states, drawing on the resources of 1,000 faith organizations. More than 8,000 children have been assisted by the program. Readers will learn the steps and procedures necessary to develop an effective mentoring program.

## **Working With Children and Families Separated by Incarceration: A Handbook for Child Welfare Agencies**, by Lois E. Wright & Cynthia B. Seymour, 2000, 143 pages, \$18.95.

Available from: Child Welfare League of America, Inc. P.O. Box 2019, Annapolis Junction, MD 20701-2019 (800) 407-6273, FAX: (301) 206-9789, E-mail: [cwla@pmds.com](mailto:cwla@pmds.com) Website: <http://www.cwla.org>

This well-done handbook helps practitioners learn about the needs of children with incarcerated parents and how to intervene effectively to meet the children's needs. The manual is very complete, starting with the need to protect children when a parent is arrested, discussing options and procedures for caretaking, considering the reunification needs, and detailing how to assess for permanency planning and decisions.



## **Mentoring Children of Prisoners Curriculum**

Some children and families of prisoners have access to adequate supports and are managing fairly well. Others are dysfunctional and some are barely coping. Mentors can be a significant part of the lives of children whose parents are incarcerated, no matter where on the continuum they fall. However, mentors must be prepared for the feelings, reactions, and behaviors they may encounter.

The **Mentoring Children of Prisoners Curriculum** is designed to prepare mentors to have meaningful relationships that will contribute to the coping process for children with incarcerated parents. Instruction includes information on the impact of parental incarceration on child development, family dynamics, and the parent-child relationship. The curriculum has been created to provide information and tools to mentor trainees who have little or no expertise in working with children of prisoners as well as to enhance skills for those who have a background in helping this unique population. Trainers have flexibility and freedom to adapt and arrange training to meet the needs of the agency.

In a 2-day "training of trainers" the CWLA-qualified Master Trainer will teach program staff how to effectively train mentors. A \$3000 fee plus travel costs is required for training up to 15 staff. Each trainee receives a copy of the Mentoring Curriculum and Instructor's Guide as well as Participant Resources for all ten training sessions.



**Federal Resource Center  
for Children of Prisoners**

Contact: Federal Resource Center for Children of Prisoners, Child Welfare League of America, Inc., 50 F Street, NW, 6th floor, Washington, DC 20001-2085 (202) 638-2952 x539; FAX: (202) 737-3687 Web site: [www.childrenofprisoners.org](http://www.childrenofprisoners.org) or [www.fcnetwork.org](http://www.fcnetwork.org)

# Children of Incarcerated Parents

*continued from page 6*

2004). Thus, the issue of sustainability must be realistically addressed (Goode & Smith, 2005).

Jucovy (2003) examined a Philadelphia mentoring program, "Amachi." She concluded that four factors led to the success of the program. These were: structure; management; commitment; and resources. Having other programs partner with a mentoring program can enhance effectiveness as well. A system of accountability is vital. The Amachi model has four accountability-related innovations. First, the mentors are organized into small communities supported by a church volunteer coordinator. Second, each community of mentors has the support of the faith community. Third, each community of mentors has the support and authority of the religious leader. Finally, each community of mentors is able to compare its output to that of other communities.

One of the major differences between the Amachi model and standard mentoring programs is that Amachi recruits the children to be mentored. They obtain names of children from the inmates and prison social workers, then locate the caregivers and invite the children to join the program. In contrast, the usual model is that the caregivers contacts the mentoring program for the child (Calhoun et al., 2005).

Mentors need to be careful not to create divided loyalties. Children may feel allegiance both to their parent and to their family. If the family is not supporting the parent, or if the parents and the caretakers are both troubled, children may feel they must choose between the mentor's values and lifestyle and their family's lifestyle. A mentor who sees him or herself as a "savior" may find it difficult to align with the family and the incarcerated parent (Slavin, 2004).

*"We need mentors to love children, especially children whose parents are in prison"*

President George W. Bush,  
January, 2002  
State of the Union Address

## Children's Groups

Children can benefit from support groups. Sometimes guidance counselors offer in-school support groups for specialized populations. Churches and community groups can

also offer specialized groups for children with incarcerated parents. VCPN reports on several Virginia offerings (see Girl Scouts Beyond Bars and All God's Children Camp, this issue).

## Reunification

The majority of prisoners expect to live with their families after release from prison (Datesman & Cales, 1983; Hagan & Dinovitz, 1999 cited in Arditti & Few, 2005; Koban, 1983; Lee, 2007; McGown & Blumenthal, 1978). One study indicates that 71% of inmates expect to live with family upon release (www.cwla.org). Families, some stretched to the limit by the costs and efforts in caring for the children, now need to assume the costs of an additional person until employment is found and the released parent is self-sufficient.

The stresses associated with community and family reintegration can increase the risk of child abuse and neglect (CIPP, 2002). Parents who are leaving the correctional facility face many challenges – finding or resuming employment; financial pressures; establishing housing; dealing with friends and family. Without support, parents can return to the behavioral patterns that contributed to the original offenses. They can also become overwhelmed when trying to resume full-time child care responsibilities (Datesman & Cales, 1983). Thus, parents who are being released from prison should be screened for protective orders and a history of domestic violence or child maltreatment. Contact with children should be determined on a case-by-case basis and regularly monitored and reassessed (Naser & LaVigne, 2006).

Parents with substance use disorders are considered to be at heightened risk of re-offending. The data on re-offense rates offered by the U.S. Department of Justice (2007) is old. Of 272,111 persons released from prisons in 15 states in 1994, 67.5% were re-arrested for a felony or serious misdemeanor within three years: 46.9% were reconvicted, and 25.4% were re-sentenced to prison for the new crime.

Arditti and Few (2005; 2007) identified "triple threat" factors that influenced mothers' mental health and overall social reintegration upon release. These were the presence of de-

pression, substance abuse, and domestic violence. Findings suggested that depression persisted and sometimes worsened after release. Triggers could then exacerbate the pre-existing threats. Loss of relationships, employment, or even worsened health or an injury could be a trigger for relapse. Arditti & Few (2005) found that incarceration, even for short periods of time, increased the likelihood of divorce and decreased the likelihood that mothers will reside with the father of at least one of their biological children.

Children may have many pent-up feelings that could not be expressed while the parent was in jail. The child may be angry at the parent and may begin to act out that anger now that the parent is again available. Children may have developed fantasies about how life will be when the parent is released. If the reality does not match the child's hopes, children may be angry and upset and feel that their sacrifices while the parent was in jail were made for no cause.

In a study of 75 women and their children, Stanton (1980) interviewed both mother and children while the mother was incarcerated and after her return. About a third of the mothers reported that their children's behavior towards them had worsened, for example, showing less respect, "talking back" more often, and using more profanity. A fourth said their children's behavior in general had worsened. The majority (89%) reported adjustment problems getting settled. Financial problems and difficulties finding employment were common. There was a lack of stable friends and support systems.

Few women had expected such difficulties while they were serving their jail sentence. The time after release from prison and being reunited with children was a period of some instability and characterized by problems for the mothers and anxiety for the children. Children worried that their mother would be separated from them again and would relapse into substance abuse. After the mother's release, children who moved back with her may have had to switch schools as well as moving their residence. Their routine was then disrupted and some children felt insecure.

## Collaborative Efforts

Increasingly, partnerships between faith-based organizations and secular agencies have created effective models and programs for inmates and their children. Faith-based organizations supply volunteers while secular agencies have the expertise, staff, and administrative ability to train volunteers, oversee the programs, and evaluate outcomes (Calhoun et al., 2005).

Collaborations are not "easy or automatic" (Calhoun et al., 2005, p. 3). Secular and faith-based partners approach the work from different perspectives and different backgrounds. However, the success of these partnerships

## How Can Mentoring Benefit Children?

- Reductions in substance abuse
- Improved school attendance
- Improved academic status
- Better classroom behavior
- Lowered incidence of violence
- Increased self confidence
- Increased hope for the future

Source: People of Faith Mentoring Children of Promise, 2005

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## Spotlight: Girl Scouts Beyond Bars

Girl Scouts Beyond Bars is a program designed for daughters, granddaughters, and nieces of incarcerated women. The program allows the incarcerated woman to be a part of her child's or relative's life and teaches girls ages 5 to 17 to make choices that will enable them to stay outside of prison. The program began in 1992 as a pilot project between the National Institute of Justice and the Girl Scout Council of Central Maryland. The program has expanded to over 37 programs throughout the country serving approximately 800 girls and 600 mothers annually. Though each local

program varies in content and focus, each Girl Scouts Beyond Bars program strives to increase the parent-child bond and develop positive self concept and awareness.

Fluvanna Correctional Center collaborates with the Girl Scouts Beyond Bars program of the Skyline Girl Scout Council. The program has been in operation since 2001. They operate in conjunction with the M.I.L.K. program (see separate Spotlight, below). The program has received grants from the Department of Justice and has been featured as a premiere program. For a description of the activities within the prison, see the M.I.L.K. spotlight.



For more information contact: Sharon Dunn, Fluvanna Correctional Center for Women, (434) 984-3700 x 4222 or E-mail: Sharon.Dunn@vadoc.virginia.gov

## Spotlight: Mothers Inside Loving Kids (M.I.L.K.)

Prevent Child Abuse Virginia worked with the chaplain at the Virginia Correctional Center for Women in Goochland in the 1980's to establish the M.I.L.K. program. VCPN reported on the program in Volume 5 in 1982. Johanna Schuchert, Executive Director of Prevent Child Abuse Virginia, comments on the program's early years. "We designed the program to meet some of the parenting needs of mothers within the correctional system. The program sponsored parenting education classes; child development classes; a support group; and visits between the mothers and children in order to strengthen parent-child relationships. M.I.L.K. is also based upon a shared leadership concept and women in the program assume leadership roles and directed the program themselves." Schuchert says the program was very successful. "Mothers who are involved in the program have lower recidivism rates after they leave the facility. While in prison, their behaviors improve because they want to be able to visit with their children and remain in the program," she explained.

M.I.L.K. operated for 15 years in the Goochland facility. When the Fluvanna Correctional Facility opened in 1998, inmates were transferred who had been in the Goochland M.I.L.K. program. Sharon Dunn, prison counselor, now coordinates the program. She relates, "M.I.L.K. restarted in 2000 and in 2001 we began collaboration with the Skyline Council Girl Scouts." Funding has been from Department of Justice grants to Girl Scouts Beyond Bars (see separate spotlight, above).

"We are different than the usual Girl Scouts Beyond Bars in that we work with the moms as opposed to the girls," explains Dunn. "We use the program, *Parenting on the Inside*, developed by Dr. Ann Loper. She and her graduate students teach the program to inmates. Some of the mothers are given additional training in group facilitation and they assist in



helping teach the class and with the small group activities."

The M.I.L.K. program is available only to mothers who have completed the parenting classes, who have been incarcerated for at least six months, and who have a positive behavioral record. Women must apply and be interviewed by the Board of Directors, who chooses the participants.

Dunn explains that the standard visitation available to parents is a weekly visit of 1 to 2 hours where visitors (including children) must sit on a chair and only talking, not any activities, is allowed. Often, children find the visits boring or intimidating. Since the prison serves women from throughout the Commonwealth, some children are located far away and can not afford the time or money needed to visit frequently. Mothers accepted to the M.I.L.K. program can continue to have weekly sit-down visits, but they also receive 6 all-day visits with their children per year.

Dunn describes the procedures, "We have a group of about 40 mothers in M.I.L.K. They are divided into two groups. Each group has 6 all-day visits with their children. There is an all-day visit once every two months. We work with the mothers on personal leadership and being a good role model. The mothers plan and lead the activities and everyone has a role. Each child is able to see his or her parent contributing."

The all-day visits begin at 9:00 with unstructured time. Inmates arrange games and craft activities. At 12:30 there is a flag ceremony that involves both the moms and the children. It is followed by circle time. Circle time might include dancing, relays or contests and is also a time to recognize and celebrate birthdays. The afternoon involves a structured Girl Scout activity. Recent selections have included a workshop on internet safety, a program "Uniquely Me" for self-esteem building, and a multi-age substance abuse prevention program called "In the Zone." Dunn is enthusiastic about the program effects. "The day-long visits enhance bonding. At first it is hard for the children to leave at the end of the day. But soon the children realize that they have another program day to look forward to and they separate more easily."

In 1998, Alvin Moore and Mary Clement measured some of the outcomes of M.I.L.K. participants in the Virginia Correction system. They compared 20 women in the program to a control group of 20 women. They found significant gains in the women's knowledge of positive parenting techniques after completing the parenting classes. The intervention did not, however, significantly change the self-esteem of the participants. The findings were published in the *Journal of Offender Rehabilitation*.

For more information, contact: Johanna Schuchert, Executive Director, Prevent Child Abuse Virginia, 4901 Fitzhugh Avenue, Suite 200, Richmond, VA 23230 (804) 359-6166 x310; FAX: (804) 359-5065; E-mail: mail@pcav.org

For more information, contact: Sharon Dunn, Fluvanna Correctional Center for Women, P.O. Box 1000, Troy, VA 22974 (434) 984-3700 x 4222 or E-mail: Sharon.Dunn@vadoc.virginia.gov



# Virginia's Picture

Virginia has a variety of programs and initiatives to assist prisoners and their families. Some are described in separate spotlights. Efforts fall under several broad categories. These are: programs serving the children of incarcerated parents; visitation programs; parenting programs for incarcerated parents; programs to facilitate re-entry; research programs.

## Programs for Children of Incarcerated Parents

Three efforts that are featured in separate spotlights, this issue, are All God's Children camps, Girl Scouts Beyond Bars, and the Milk & Cookies program.

## Visitation Programs

Some of the parenting programs described below are comprehensive and include visits with families and children. Readers should also see the separate spotlight on Assisting Families of Inmates, Inc. which provided over 2900 family visits in 2006-07.

## Programs for Incarcerated Parents

### Linkages: Building Strong Connections

Since 2000, the Colonial Services Board in Williamsburg has worked with the Virginia Peninsula Regional Jail (VPRJ) to sponsor the Linkages: Building Strong Connections program. The focus of Linkages is building healthy relationships, developing communication skills, and improving parenting skills. The program provides support for incarcerated parents, their children, and the caregivers. Inmates attend a weekly group to learn effective parenting skills. A monthly Family Night provides an opportunity for children to interact with their parent in a supervised, child-friendly environment. "The goal is to build strong connections between the inmates and their families and children," explains Lewi Blosser, child/family prevention specialist. "Strong connections mean a better adjustment when the parent is released," she adds.

VPRJ program staff choose from the inmate applicants the parents who will participate in Linkages. The group is co-ed and serves both male and female inmates. The curriculum is

six months in length and utilizes the research-based Nurturing Program, adapted for the inmate population. Currently, the group serves eight moms and eight dads. They learn about child development, how to discipline without violence, and how to develop positive relationships with both their child and the important people in their lives.

One component of the program explores ways inmates can maintain long-distance communication with their children. Blosser recalls that one father started writing to his child for the first time while participating in Linkages. There was no response for many months and he did not know whether the letters were even getting through. Then he got a letter back from his child! They began interactive letters where the father started the letter using questions and drawing pictures, the son added to it, and the father kept it going by adding more. Eventually, the father and son were able to visit during Family Night. It was a powerful experience for both of them.

Inmates in Linkages participate in a monthly family night. The incarcerated parents visit with their children, enjoy books and games, work on art projects, and participate in circle time music and dance. This is the only opportunity for parents and children to be together without the barrier of plexi-glass. The Linkages staff takes pictures of the parents with their children. The inmates are able to keep these. "That is huge!" exclaims Blosser. "The pictures are something the parents cherish."

Blosser says that one of the biggest challenges is securing a consistent source of revenue. Over time, a variety of funding sources have provided support for the program: probation and parole; St. Veronica; Historic Triangle Substance Abuse Coalition (state incentive grant); and the Virginia Department of Health. The program costs about \$15,000 a year to operate. "We are funded this year through June, 2008, thanks to an anonymous donor," explains Blosser. Funding opportunities for the next fiscal year are already being explored.

### Parenting from the Inside: Making the Mother-Child Connection

Parenting on the Inside is a curriculum that uses multi-modal teaching materials to help inmate mothers forge and maintain healthy connections with children. It was developed by Ann Loper and her graduate students

at the University of Virginia Curry School of Education. This curriculum emerged after Dr. Loper and one of her graduate students visited Mothers Inside Loving Kids (M.I.L.K.), part of the Girl Scouts Beyond Bars initiative, at the Fluvanna Correctional Center for Women. "I was so impressed with the commitment of these mothers who so greatly missed their children. They were eager learners who simply wanted to be the best moms they could be, regardless of the hardships," explained Dr. Loper.

The training is organized around 8 modules, designed to help the inmate mother become better aware of her own emotional reactions, provide information regarding developmental needs of her children, describe solutions to communication road blocks, and deal with the unique demands of being a parent while in a correctional setting.

The topics are:

- Taking Care of Feelings
- Listening to Children: Hearing with Eyes, Ears, Heart, and Mind
- Conversations that Connect: Asking the Right Questions
- The Write Way: Communication with your Children Through Letters
- Telephone Visits: Making the Connection
- Connecting With Your Child's Caretaker
- Talking to Your Children About Your Offense
- Helping Your Children When they are in Trouble

An information portion of each class uses a series of images, projected via either a DVD player or a computer, to communicate specific topical information. Mothers receive a handbook that includes pictures of each slide as well as additional commentary and questions. For each session, there are special videotaped vignettes that depict theme-related realistic stressful parent-child experiences. For example, the video vignette that accompanies the unit on phone calls (Phone Home) involves the case of a very frustrated mother who wants to talk with her child, but does not get the chance before her phone time elapses. The content of vignettes was drawn from stories relayed by inmate mothers concerning particularly difficult times for them as mothers in prison. In subsequent group discussions, inmates are encouraged to use course content to identify problematic behaviors seen in the vignette, and offer alternative solutions to handling the situation.



Specialized materials accompany particular sessions. For example, for the Phone Home session, mothers are given a "calling card" for use while on the phone that summarizes important tips for staying calm and supportive of their children. For the Writing Letters session, inmates are given a colorful booklet with ideas for letters for children of different ages.

Dr. Loper is continually evaluating the curriculum in order to provide scientific evidence of effectiveness. Initial results are promising. Inmate mothers who participate in the parenting curriculum significantly reduce their parenting stress and depression, and are more confident in their ability to parent their children, even if behind bars. Future studies will examine the impact of this training on the children themselves. Dr. Loper welcomes collaborators for this work and is happy to share materials with agencies or individuals who are doing this important work.

### Virginia Fatherhood Initiative

Sponsored by the Virginia Department of Social Services and Virginia Faith-Based & Community Initiative Office of Community Partnerships, the Virginia Fatherhood Initiative distributes the brochure "Parenting Behind Bars: Tips for Fathers in Prison" to all fathers in prison throughout the Virginia correctional system. The brochure challenges inmates to: be positive with your child's mother; ask about the rules for staying in touch with your child; tell your child the truth about the incarceration; remember the child's special days; improve yourself while in jail; and plan for release. It offers tips in each area as well as suggestions for after the prisoner is released. It is an attractive and positive publication.

### Other Programs

Other programs offering assistance to incarcerated parents are featured in the Spotlights.

### Prisoner Re-entry Programs

Two spotlights- Virginia Cares and Virginia CURE - discuss established programs for newly released prisoners.

### Virginia Re-entry Policy Academy

The Virginia Department of Social Services is the lead agency for a pilot program designed to promote public safety and prevent re-offending among ex-offenders. Five localities started the pilot early in 2007. They are: Culpepper; City of Richmond; Norfolk; King George; and Greensville-Emporia. Two other projects began in October, 2007. These are Albemarle/Charlottesville and eight localities in southwest Virginia that are forming a regional effort. The pilot programs are organized around principles of integrated service delivery and interagency collaboration both

before and after the inmate's release from prison.

Jane Brown, Director of Community Partnerships for the Department of Social Services explains the effort. "In 2003, the National Governor's Association Center for Best Practices sponsored a Prisoner Reentry Policy Academy. The Academy offered technical assistance and help in developing better prisoner re-entry policies. Virginia was one of seven states selected to participate." Brown relates that representatives from Virginia attended the Academy training for two years. "We met with corrections officials, police, nonprofit agencies, service providers, victims of crime, offenders and the families of offenders," said Brown, "and we formed committees to consider barriers to successful re-entry."

Brown said that the Virginia delegation clustered the barriers into four subsets so that interagency subcommittees could tackle each and develop a model plan. The first barrier subset was employment and education; the second was financial obligations/housing/ and financial and community resources. The third subset area was health/mental health and substance abuse. The final category was family and community reintegration.

Each subcommittee considered the specifics of their subset. For example, the group considering the second subset noted that inmates exit the prison system heavily in debt. In Virginia, incarceration is considered as voluntary unemployment. Child support obligations continue and interest is applied to the unpaid amounts. When the parents leave the correctional system, they must try to support themselves while also paying back child support. In addition, the person may have court fines and restitution payments to make. "The financial stress contributes to re-offending," states Brown.

The core committee used subcommittee input to create a model program to facilitate prisoner re-entry into the community. The effort begins while the parent is still imprisoned. Inmates can apply for the program. If accepted, they work with program representatives for 3 to 5 months and attend classes in financial literacy, parenting, and conflict resolution. "We want to decrease the risk of family violence," notes Brown.

The curriculum for financial literacy is being made available by Virginia Tech. Brown explains that they are searching for volunteers who can be trained to deliver the course. "We have been contacting retired executives through the Small Business Administration," she said.

Each participating community establishes a re-entry council where key service areas, families, and ex-offenders can meet regularly. The local directors of social services in each pilot site have brought together representatives of public and private agencies, businesses, community-based service providers, and faith-based organizations to serve on the re-entry council. A transition plan is developed with the community, the correctional center, and the offender. Brown explains that all participants are volunteers. "It takes a high level of commitment," she emphasizes.

A key component in the model program is the use of volunteer mentor families. The volunteer family meets the offender when they are released from the facility and serves as a long-term support system. Volunteer mentor families are trained and able to help not only the offender, but the offender's family as well.

Brown summarizes the basic components of the model. "We are based on three principles: interagency cooperation; integrated serv-

*continued on page 12*



### Final Report of the Virginia Commission of Youth: Children of Incarcerated Parents, 2002.

Available from: The Virginia Commission on Youth, General Assembly Building, Suite 269, Richmond, VA 23219 (804) 371-2481, FAX: (804) 371-0574 or on their website: <http://coy.state.va.us> (click on Reports).

This report to the Governor and the General Assembly of Virginia is a follow-up to a 1993 "Study of the Needs of Children Whose Parents are Incarcerated." The 1993 study sought to determine the number of minor children

in Virginia with a parent incarcerated in a prison or jail. However, it became apparent that no mechanism existed in the Commonwealth to collect data about minor children of prisoners and the number could not be ascertained. The 1993 report recommended that the Commonwealth develop a mechanism for collecting information about minor children of prisoners and that literature be disseminated to incarcerated parents, alternate caregivers and children regarding the criminal justice system and the resources available in the community to assist these families.

The 2002 report notes that there is still no systematic way to learn about the children of prisoners. The report did identify difficulties for children who wanted to visit parents in prisons. Some visiting areas were not hospitable, making caregivers reluctant to bring children into the environment. Waiting times for visits were often lengthy and visits can be shortened due to extended processing times and crowded visiting facilities. Negative effects for both parent and child are discussed.

The report examined the link between parental incarceration and children's contact with the justice system. Data from the Prison Visitation Project (1994), a needs assessment contracted by the Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Service was examined. This project documented behavioral patterns for a sample of children in Virginia with incarcerated parents. This study found that 41% of the children with incarcerated parents between ages 12 and 18 had been suspended from school within the prior year and 31% had been involved with the police. Data from the Virginia Department of Juvenile Justice indicated that in FY 2001 and FY 2002 38% of incarcerated youth indicated a parent who was currently or had been incarcerated. The report concluded that the incarceration of a parent can be linked to "a complex cycle of alienation, dysfunctional behavior, and criminal activity."



## Virginia's Picture

*continued from page 11*

ice delivery; and connection to positive family supports such as the family-to-family mentoring," explains Brown. She notes that surveys of inmates reveal that prior to release, their main concern is employment, but after release, their main concern is family.

After creating the model the committee had to find communities willing to test it. They approached the Virginia League of Social Service Executives and obtained their support. The Virginia Department of Social Services is the lead agency for the pilot programs. Each locality has an assigned state correctional facility from which a minimum of 15 and a maximum of 50 offenders will be referred for participation in the program over a three-year period. Enrollment began in November 2006 with an initial group of 136 participants and currently there are 139 participants.

The pilots are being tried without any additional funding. Thus, people must have faith in the model. Brown says the potential is great. Richmond, for example, has about 1000 persons released from prison each year. Norfolk has approximately 1200.

There is an active research component to the project. So far, baseline data has been gathered on 124 participants and 105 comparison group members. The two groups are similar on baseline data. The baseline shows that the typical participant is an African-American male in his mid-30's with less than a high school education. The largest challenges to their release are paying debts, obtaining employment, and finding somewhere to live. The participants believe that immediate needs are the most crucial including: financial assistance; health care; employment; and transportation rather than needs such as education or job training. Only one in five of the inmates expect to live with spouses upon release with an additional 15% expecting to live with family. Nearly a quarter of the inmates don't know where they will live.

Brown is enthusiastic about the project. She is a career veteran with social services with more than 30 years experience. "This is one of the most interesting and challenging projects I have ever tackled!" she exclaims. "It is an effort that can make a positive difference."

## Research Programs

Virginia's academic scholars are active in conducting research on children with incar-

cerated parents. Barbara J. Myers, Ph.D., teaches in the Department of Psychology at Virginia Commonwealth University. She has been active in the All God's Children camp (see Spotlight, page 4) since 1999 and has been visiting inmates in correctional centers for nearly 15 years. Dr. Myers describes her involvement with the camp as "year-round." Although the camp is only one week in the summer, there is extensive planning, fundraising, and outreach to identify the children. Dr. Myers notes that since no agency tracks children of incarcerated parents, identifying children who could benefit from the camp requires much effort.



Barbara J. Myers,  
Ph.D.

Dr. Myers investigates both risk factors and protective factors for children. "Each child has her own story," remarks Dr. Myers, "but all have risk factors. There are generally risk factors on top of risk factors. What we know from our research is that children with multiple risk factors, as a group, have poor outcomes. Many of these children have mental health, behavioral, and school achievement issues."

"Children have protective factors as well," continues Dr. Myers. "The good things in their lives both within themselves and the support from their families serve as protective factors," she explains. "Our research shows that children who are high on hope and have good social support do particularly well while children who feel hopeless and unsupported are sad and frequently in trouble."

Dr. Myers is concerned about the system of care for children whose parents are jailed. Children whose mothers are incarcerated frequently live with kin caregivers who typically receive no financial help. Grandparents or other kin generally assume the care of the children willingly, but the personal costs can be high. There are physical and emotional demands that accompany child rearing. Caregivers can feel overwhelmed, especially if they are in poor health or if the children have behavioral problems. Dr. Myers relates that a recent study revealed that caregivers report very high parenting stress. "Nearly 30% of the caretakers surveyed had parenting stress levels that were in the 90th percentile compared to national norms," she explains. "We best help children by helping the people who are raising them. That includes the incarcerated parent. We don't have policies in place to address those needs. The need is huge and my heart goes out to the families."

Dr. Myers says that many children are doing very well. "In many cases the families

have rallied and are doing a tremendous job raising the children. Most children attending the summer camp do not have difficulties in the clinical range."

The point where a parent returns home can be stressful for children, says Dr. Myers. "The re-introduction of the parent offers both positives and negatives. Children are disrupted by change, even a good change. The parent may move the children to a new neighborhood and a new school. "There is so much to adjust to," comments Dr. Myers. "It is hard for the parent also as she must find a job and learn how to manage in the community." There is also the possibility of re-offending. "The child is so ready for everything to be OK when their parent returns. The disappointment if a parent is arrested again is intense. The child feels the parent lied and deserted them," notes Dr. Myers.

Dr. Myers' graduate students teach parenting classes at six prisons, working under the direction of Sue Kennon who is a teacher with the Department of Correctional Education. Kennon's program uses curricula titled "Moms, Inc./Dads, Inc." that Kennon helped to develop specifically for parents who are incarcerated (see Spotlight, pages 16-17). Under Dr. Myers' direction, Kennon evaluated this curriculum as part of her Master's degree. She found the program helps parents understand the impact of their incarceration on the children and families. Parents participating in the program learned that children need love, letters and consistency and acknowledged that they should show caregivers respect, gratitude and support. Dr. Myers plans to continue an active research program and hopes to educate people about the needs of both the children and their incarcerated parents.

At Virginia Tech in Blacksburg, Joyce Arditti, Ph.D., Associate Professor of Human Development, has focused her research on how parental incarceration affects the caregivers of the children. She has interviewed caregivers who bring children to visit parents (usually the father). "Incarceration has profound social and economic effects," asserts Dr. Arditti. "It intensifies poverty and the child loses financial support that was previously provided by the father. It sometimes 'tips the scales' for families," she says. Dr. Arditti has found that the incarceration drains the family financially. They send money to the inmate and use money to pay for transportation for visits.

At William and Mary, assistant professor Danielle Dallaire, Ph.D. in the Psychology Department has started a project called EPIC (Effects of Parental Incarceration on Children). The research has three phases. In Phase I, inmates are interviewed about their own backgrounds and about their children. They are asked to give permission to contact the caretakers of their children. Of a sample of 100 inmates, about 75 consented to allow the researchers to speak with their children's caretakers.

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## Spotlight: Assisting Families of Inmates, Inc.



### Assisting Families of Inmates, Inc.

AFOI was created in 1978 as a volunteer transportation program designed to assist Richmond area families visiting relatives in Virginia state prison facilities. The overall goal of Assisting Families of Inmates, Inc. (AFOI) is to help families preserve and strengthen positive relationships with relatives incarcerated in Virginia's state correctional facilities. AFOI helps families deal with incarceration and prepare for release and reunification. AFOI has made it possible for low socio-economic status families to visit Virginia's isolated, rural prison facilities that are not served by public transportation.

The initiative to assist low socio-economic status families with incarcerated relatives was led by Thomas A. Edmonds of the Second Presbyterian Church in Richmond who was familiar with the needs of prisoners' families

from previous volunteer experience in Florida. Edmonds convinced his congregation, as well as other downtown area churches, to provide transportation and financial support to needy families. Within six years the program, formerly known as Prison Family Support, was providing visiting day transportation to fifteen state prisons. Weekly support group meetings were held in the churches and referrals were made to other community service organizations.

AFOI has expanded its services to include the Milk and Cookies Children's Program (MAC) and the All God's Children Camp (see separate Spotlight, page 4). The MAC program, launched in 1999, provides services just to children of incarcerated parents. The services include: children's support groups; information/groups for parents/caregivers on the special needs of their children; assistance to caregivers (resources that can help financial, housing, transportation and other concerns); and support to help families reunite when the parent is released. Today the MAC program is operated by two full-time Program Coordinators, Jennifer Moreno and Erin Burke, who are part of an interdisciplinary outreach team housed in the Blackwell, Swansboro, Bellemeade, Oak Grove, Summer Hill, Ruffin Road, and Woodville Elementary Schools. The other agencies represented on the team include Communities in Schools, Family Lifeline, Richmond Community Action Program

(RCAP), Americorps, Youth Day Treatment, the Micah Initiative, and the Richmond Behavioral Health Authority.

The *Milk and Cookies* program was evaluated by Michael J. Sheridan, Ph.D. at Virginia Commonwealth University's School of Social Work. During the second year of the children's support group, data were gathered. Some of the findings included improved grades for half of the children; reduction in absences for over 20 percent; improved teacher ratings for 80 percent of children; and significant decreases in secrecy.

All God's Children Camp is sponsored by the Virginia Conference United Methodist Church. The program is designed to give children of incarcerated mothers an opportunity to have a positive experience through a week-long camp. (See Spotlight, this issue, page 4.)

In 2006-2007, AFOI provided over 2,900 visits to Virginia correctional facilities. The programs participants are primarily African-American women and children and over 95% of families report an annual income of less than \$15,000.

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## Spotlight: Kingsway Prison and Family Outreach

Kingsway Prison and Family Outreach is a program that has been offering services to inmates since 1977. Kingsway operates in multiple states, including Virginia. Volunteers visit correctional facilities once a week to conduct a Bible study with the inmates or spread the gospel. They also distribute Bible study guides and materials for inmates to read on their own time. Volunteers visit the following four sites in Virginia regularly, but not exclusively: Augusta Correctional Center for Men, Harrisonburg Diversion Center, Harrisonburg/Rockingham Regional Jail, and Fluvanna Correctional Center for Women. Other correctional units in Virginia are visited when Kingsway is invited.

In addition to services provided within the prisons, Kingsway Prison and Family Outreach has an office in Harrisonburg that provides a safe haven for released inmates to receive the guidance and support. The comforting atmosphere allows previously incarcerated individuals to form relationships with other former inmates who are attempting to raise a family. Kingsway provides financial management counseling, as well as drug and alcohol recovery programs to those in need. There is also a Pen Pal Program where volun-

teers from the community are paired with same sex inmates as "Pen Pals" and the two correspond via letters to create a lasting friendship.

The Kingsway program is also intended to aid the families of incarcerated parents. They provide transportation and have furnished toys to the waiting areas of prisons so the children are occupied while their caretakers visit the inmates. Kingsway also gives food, clothing, school supplies, Easter baskets, Christmas presents, and birthday cards to children of incarcerated parents. There is an effort called the Apple Project that is designed to generate gifts for children of incarcerated parents for the holiday season. As part of this project, paper apple trees are placed in local churches. Church members can select an apple that has a gift listed and purchase the gift for a child of an incarcerated parent. In 2005, 325 children received gifts from the Apple Project.

Inmates respond positively to the program



and often express their thanks through thank-you cards, letters, and notes. Inmates are particularly happy around Christmas because some of their children would not receive any other gifts besides what is offered from Kingsway. Inmates are always excited to receive mail from their Pen Pals.

The program is funded solely on donations from the churches and community busi-

nesses and organizations. Kingsway is hoping that they can one day increase donations to the point where they can offer housing to released inmates.

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# Virginia CARES

Assisting newly released prisoners is not only critical for reducing their recidivism rates but also for the benefit of their families as well. Virginia CARES, a non-profit community-based program, supports recently released parolees and their families in transitioning into their community. Guidance and counseling is provided at fourteen service sites throughout the Commonwealth. The acronym CARE means Community Action Re-Entry System, which reflects the main objective of the program: focusing on the community and family to deter future crime.

Inmates from 20 prisons and 52 cities in the Commonwealth are encouraged to contact a Virginia CARES service office in their community upon their release. The thirteen service offices are located in: Alexandria; Lynchburg; Petersburg; Martinsville; Hampton/Newport News; Abingdon; Danville; Powhatan/Goochland; Richmond; Rocky Mount; Norfolk; Fredericksburg; and the central office in Roanoke.

Virginia CARES offers support services according to individual needs. Emergency needs are met first by providing food, clothing, transportation, legal referrals, medical referrals, and substance abuse counseling. Long term support services are also available. These include: career counseling; one-on-one counseling; home visits; volunteer opportunities; support groups; and job readiness workshops.

The Center offers leads to potential employers and helps by rehearsal and preparation for job interviews. The Virginia Department of Corrections collaborates with Virginia CARES to provide a life skills class called "Productive Citizenship: A Vision Beyond Survival." The class includes units on employment motivation, anger management, money management, family matters, parenting, and other topics. Each class consists of fifteen sessions and topics vary depending on the CARES site.

Virginia CARES is not a state agency but rather a non-profit self-incorporated agency governed by a Board of Directors that includes public officials, low-income representatives, and private individuals. The program receives funding through the Virginia General Assembly administered by the Virginia Department of Criminal Justice Services. According to Ann Fisher, Executive Director, for the 2007 year funding was provided by Federal Earmark funds and State General Fund money, as well as a portion of the federal Community Service Block Grants. Fisher says, "For the upcoming fiscal year, the Coalition will be once again fully funded by the State General Assembly." Fisher notes that Virginia CARES is "the only statewide nonprofit agency providing pre- and post-release services to offenders and ex-offenders in Virginia." CARES is also the only statewide member of the Offender Reentry and Transitional Serv-

ices (ORTS). Other members are Offender Aide and Restoration (OAR), local jails, and one private non-profit local agency. Fisher adds, "CARES was incorporated on March 30, 1979 by the Commonwealth of Virginia as a statewide corporation. Prior to that, the program was operated under a local community action agency in Roanoke for seven years."

Virginia CARES has a proven record of success. According to a "snapshot evaluation" done approximately five years ago on the entire Coalition, Fisher claims that 85% of Virginia CARES participants successfully complete and implement life plans that change their future for the better, and are establishing responsible relationships with their families and children. Also, 24% of all Virginia CARES participants return to prison, compared to the national rate of 44%. Keeping former inmates in the community through lower recidivism saves Virginia taxpayers almost \$38 million annually. Fisher estimates that for every dollar distributed to Virginia CARES, the average taxpayer saves \$10.

According to Fisher, "hanging out with friends who got the inmates in trouble in the

first place" is typical behavior upon release. To prevent this and encourage family bonding instead of dangerous activities with criminal friends, direct contact and counseling with CARES Case Managers and support groups assist the inmates in making lifestyle changes. The inmates who have already contacted the service are willing to make these life changes according to Fisher. As far as plans for the future, Fisher notes that CARES is hoping to expand the programs for inmates at a federal level as well as implement more services including a geographic program expansion, an economic development program, expanded grant and research funding, and a program for incarcerated youth as well.

For more information, contact Executive Director Ann Fisher, Executive Director, VA CARES Central Office, 145 W. Campbell Ave, Ste 555, Roanoke, VA 24011, (540) 342-9344, FAX: (540) 342-9427, E-mail: afisher@infionline.net Web site: www.vacares.com

## Spotlight: Virginia C.U.R.E.



Virginia C.U.R.E., founded in 1992, serves by the statement, "Today's Prisoners are Tomorrow's Neighbors." With nearly 34,000 men and women incarcerated in Virginia prisons, and 95% of them expecting to be released, there indeed may be new neighbors in many communities. Realizing the potential difficulties that newly released prisoners may experience, Virginia C.U.R.E. advocates for programs that will ease the transition into society and into the inmate's family. Virginia C.U.R.E. organizes activities within the prison system and the community to provide information, education, and support to families of those who are presently or formerly incarcerated.

Virginia C.U.R.E. is a chapter of the national C.U.R.E. organization. The acronym stands for Citizens United for Rehabilitation of Errants. The Virginia chapter, with headquarters located in Alexandria, has local chapters in Hampton Roads, Harrisonburg, Richmond, and Lebanon.

LeVerne Hitt is the leader of the local Harrisonburg chapter that meets twice a month at the Gemeinschaft Home. She comments, "We advocate for people in prison and their families." The funding of the program is depend-

ent upon membership dues and tax-deductible donations. The volunteers work closely with state legislatures to implement or propose legislative changes.

One family event the Virginia C.U.R.E. volunteers have organized is the Annual Family Day Picnic, which is free of charge for children with incarcerated parents and their caretakers. It is typically held in Richmond.

According to Jean Auldridge, Director, Virginia C.U.R.E. is not a service organization, but rather "an all-volunteer, non-profit, membership, advocacy, and support organization." Legislation before the General Assembly is carefully monitored and C.U.R.E. members are updated through e-mail and the web site. A summary of legislation and final report are prepared and available upon request.

Auldridge mentions that C.U.R.E. "networks with just about every organization we know of in order to be informed and pass that information on to members." They also sponsor meetings and forums to enable families of prisoners to communicate with one another. The local chapters that meet provide family support and empower families while their loved ones are incarcerated.

For more information contact: Jean Auldridge, P.O. Box 19307 Alexandria, VA 22320, (703) 765-6549, E-mail: ccip@earthlink.net or virginia cure@cox.net Web site: www.vacure.org/





## Spotlight: *Opportunities, Alternatives, & Resources (OAR) of Fairfax County*

Previously called "Offender Aid and Restoration" the Fairfax County branch of OAR is a local non-profit restorative justice organization providing human services since 1971. OAR's mission is to create a safer community, rebuild lives, and break the cycle of crime with opportunities, alternatives, and resources for offenders and their families. OAR was ranked among "some of the best small charities in Greater Washington," according to the Catalogue for Philanthropy 2004-2005 for Greater Washington.

There are a total of eight OAR affiliates, with four in Virginia. The Virginia locations are: Fairfax; Richmond; Arlington County; and the Jefferson area. All of the locations operate separately, but they each have the same goal of providing individuals in the criminal justice system with rehabilitative and supportive services to help them become productive members of the community.

The Fairfax OAR has between 25-30 scheduled classes and support groups that focus on developing coping, vocational, and life skills. The primary service area is Fairfax County, but some services are available to persons in Prince William and Loudoun Counties and to those in the Washington Metropolitan area who were processed through the Fairfax County Court system. Family programs are open to all in need, regardless of residency.

Fairfax OAR offers multiple programs to incarcerated individuals, including transitional services and family services. The transitional program includes post-release services to help offenders re-integrate into their communities and successfully find employment, housing, health care, and related services such as mental health and substance abuse treatment, if needed. As part of the family services, incarcerated parents are offered opportunities to attend parenting classes that teach effective discipline techniques and other parenting skills. Incarcerated fathers are also allowed to record stories for their children and send them the book and recording. Senior Case Manager, Maria Ortiz says this is a chance for fathers to let their children know, "I'm here and I love you."

Fairfax OAR's Alternative Sentencing Program diverts offenders from costly incarceration and offers a second chance to those who have committed misdemeanor offenses. In partnership with over 500 area non-profit organizations and government agencies, OAR provides opportunities for the performance of court-ordered community service. Community service sites may include libraries, parks, schools, and emergency shelters, as well as social service and charitable organizations.

Fairfax OAR also attempts to prevent incarcerated individuals from committing future crimes. The Impact of Crime program is an

educational and rehabilitative program designed to assist offenders in taking responsibility for the crimes that they have committed. Offenders who voluntarily participate in the program develop a greater understanding of the profound effect their crimes have had on the lives of victims and on the community. The Violence Intervention Program also aims to establish that domestic violence is a crime and will not be tolerated. It provides participants with skills and attitudes needed to eliminate violence in their lives. Lastly, the Virginia Serious and Violent Offender Reentry (VASAVOR) program specifically targets incarcerated individuals who have committed serious felonies (those with 5-year to 25-year sentences). Fairfax OAR works to assist these individuals gradually re-enter life outside of prison.



Family and Corrections Network (FCN) is the first national organization in the United States focused on families of prisoners. FCN is an organization designed to uphold families of prisoners as a valued resource to themselves and their communities in order that the criminal justice system, other institutions, and society become supportive of family empowerment and self-determination. Established in 1983, FCN provides ways for those concerned with families of prisoners to share information and experiences in an atmosphere of mutual respect. FCN's headquarters are located in Palmyra, Virginia but they assist families of inmates all over the United States.

FCN works in conjunction with the families of prisoners, policy makers, the public, researchers, educators, correctional personnel, and numerous program providers. In Virginia, FCN works with such programs as: Assisting Families of Inmates, Inc., Kingsway Prison and Family Outreach, and OAR of Fairfax County. Jim Mustin, Executive Director of FCN, says one way their organization assists these programs is providing onsite training to those who want to become a volunteer. "We also educate family therapists about local programs that can assist families of prisoners. FCN will pay for traveling to training sessions or they can even be conducted over the telephone," he explains.

One innovative offering is the Storybook Project. Storybook Projects throughout the United States provide children of incarcerated parents the gift of a book and the voice of their parent on tape reading the book. Children can then hear their parent's voice as often as they

OAR of Fairfax County is funded by the Fairfax government, United Way, Freddie Mac, and personal donations. Volunteers from the community are welcomed and act as mentors for offenders, teach vocational or life skills, and provide a host of other services. An initial training program is designed to educate volunteers to become fully functioning members of the OAR team. After a personal interview with the Volunteer Department, volunteers must attend 16 hours of intensive orientation.

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## Spotlight: *Family and Corrections Network*

choose. The Storybook Project began in 1988 at the Logan Correctional Facility in Illinois. It is now offered in 11 prisons and jails, mainly in central and southern Illinois.

FCN distributes information through their publications, web site, and speakers' bureau. They publish the FCN Report, available to the public and organizations. The FCN Report contains information about programs across the country for families of prisoners and offers general information about incarcerated parents and their families. It is published three times a year. A membership that includes the publication costs \$10. Other membership packages are available with additional benefits, such as access to an online database of programs, and these memberships range from \$35 to \$100. Membership subscriptions help fund FCN in addition to federal grants, personal donations, and donations from foundations and corporations.

FCN holds national meetings for mutually respectful learning, interaction, and dialogue. These conventions create opportunities for linking with and learning from families of prisoners. They also advocate criminal justice policy reform that upholds the value of families. FCN believes that encouraging networking among families of prisoners creates mutual support and cooperative action.

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## Spotlight: Greener Pastures



When Heather Mitchell, Counselor and Program Coordinator at the James River Work Center was asked to create a program to help rehabilitate inmates, she wanted to “step outside the box.” As a horse lover, she was aware of Virginia’s burgeoning horse industry and jobs available for those skilled at handling horses. She was also aware that the Thoroughbred Retirement Foundation partners with individuals, correctional centers and historic attractions such as Montpelier to place retired race horses into safe havens. The Thoroughbred Retirement Foundation local James River Committee pays all costs for the horses and their care. The partners provide the labor, housing, and pastures.

Mitchell’s work was successful. Six horses arrived at the James River facility on September 6, 2007, another horse came a week later, and then seven more were welcomed on November 12th. “The program is designed to rehabilitate the offenders,” explains Mitchell.

“They learn how to trust an animal and have the animal trust them. They learn how to care for the horses. Their success increases their self-esteem.” Currently six offenders have been hand-picked to participate in the program. “It is an honor to be in the program,” asserts Mitchell.

Inmates groom, feed, water, walk and exercise the horses. They also attend classroom instruction, taught by Correctional Officer Jesse Barker, where the inmates receive intensive instruction on all aspects of horse care. The inmates will work 8 months to a year to complete the program. “Those who complete the course and the practical training can earn a certification from Groom Elite. This will enable them to work in the horse industry,” explains Mitchell. “This is a win-win situation. The horses receive quality care and the inmates receive rehabilitation and training at very little cost to the Commonwealth,” she adds.

Greener Pastures is a timely program. A recent study by the Virginia office of the National Agricultural Statistics Service places



equines sixth among agricultural commodities in terms of cash receipts. The value of horses in Virginia in 2006 is placed at \$1.65 billion, an increase of 13% from 2001 when the prior equine survey was conducted (Daily News Record, December 21, 2007).

More information is available from: Heather Mitchell, CMC, Greener Pastures Program Coordinator, James River Work Center, State Farm, VA 23160 (804) 784-3551, Ext. 2311, FAX: (804) 784-0881, E-mail: [heather.mitchell@vadoc.virginia.gov](mailto:heather.mitchell@vadoc.virginia.gov)

## Spotlight: Moms, Inc./Dads, Inc.

Moms, Incarcerated/ Dads, Incarcerated was developed by Sue Kennon, a “PTA mother” whose life circumstances resulted in her being incarcerated with a 48-year sentence. Kennon adjusted to prison by recovering from a drug addiction and earning a degree in Psychology from Ohio University. After her release, she earned a master’s degree in Psychology from Virginia Commonwealth University (VCU). She wrote the parenting curriculum while incarcerated.

While prison life was hard for Kennon, the most difficult part was dealing with the effects of her prison sentence on her children. Kennon’s children are now grown and doing well, but they suffered during her 15 years of incarceration. Filled with shame, anger, and pain, they acted out, their grades dropped, and they skipped school. They also turned to drugs and alcohol. Helping her children from a prison was difficult. Kennon became aware of the tremendous needs of other incarcerated parents to bridge the gap between themselves and their children.

Now an employee of the Virginia Department of Correctional Education, Kennon offers her award-winning parenting program for incarcerated parents in six correctional facilities. The course is offered for women at Fluvanna Correctional Center for Women, Virginia Correctional Center for Women, and Central Virginia Correctional Center # 13, and for men at James River Work Center, James

River Correctional Center, and Powhatan. Kennon partners with graduate students at VCU, training them to assist her with the educational groups.

Prior to creating her own program, Kennon examined typical parenting programs and found them lacking. They did not address the special needs of incarcerated parents. While some of the topics and education might be found in any parenting class, even the typical topics were adjusted to meet the needs that Kennon identified. After the introduction session, the course teaches about normal child development. “I talk about how the brain grows and what that means for child behavior. Many of the parents don’t understand why a person can’t simply talk to a child at an adult level,” remarks Kennon.

The course covers arrest and trauma to the children. “We discuss the negative effects on the children. I share my own story with the inmates. That builds credibility and also gives hope that positive outcomes are possible,” Kennon explains. A family law attorney assists with a session about legal issues such as termination of parental rights, custody, petitions for visitation, and other legal concerns.

Considerable emphasis is given to communication with children and caregivers. Kennon offers an example, “There are sometimes issues between the parents and the caregivers of their children. Parents need to be able to show gratitude for all the sacrifices the caregivers

are making, even if they are not pleased with every decision of the caretaker.” Parents are encouraged to write to their children and to send “thank you” cards to the caregivers. In one session, each parent can make a 15-minute audiotope and send it with a card to their child. Kennon also helps parents prepare for visits and to use visitation time well.

Reunification is another topic of great importance. Kennon enlists the help of a probation/parole officer as a guest speaker and also shows a video where prior inmates discuss the dangers after release. Kennon educates the parents about the fears their children likely have and about possible family viewpoints. Parents write a “coming home” letter. The parenting program ends with a graduation and a certificate. Kennon says some Virginia departments of social services are accepting the certificates in place of community parenting classes that are part of a service plan to earn visitation and work towards custody of children.

The program is popular with inmates and has a waiting list. In 2006, Kennon received one of seven awards (Statewide Star for Innovation) given by Governor Tim Kaine to honor outstanding Virginia state employees.

For more information, contact Sue Kennon, Parenting Education Coordinator, Virginia Correctional Center for Women, P.O. Box One, Goochland, VA 23063 (804) 784-3582, E-mail: [skliberty@msn.com](mailto:skliberty@msn.com)





## Virginia's Picture

*continued from page 12*

In Phase II of the project, researchers performed telephone interviews with the caretakers of children whose parent is incarcerated. Dr. Dallaire and her research team have completed about 50 telephone interviews. For Phase III, conducted summer, 2007 the researchers met with the caretakers and the children at a local library. The children completed various measures of social, emotional, and intellectual functioning, including the Peabody Picture Vocabulary Test and the Achenbach Youth Self-Report. Caretakers also completed measures of personal functioning, rating the stress in their life, as well as measures of the child's functioning such as the Achenbach Child Behavior Checklist. Of the original sample of 100 inmates interviewed at the prison, 27 of their families have participated in this phase of the project.

In Phase IV, Dr. Dallaire plans to continue data collection with children whose parents are incarcerated as well as collect data from a comparison group of children who are separated from their parent due to other reasons (such as drug addiction or divorce). She is also examining developmental issues. She is interested in outcomes for young children, for school-aged children, for adolescents, and for adult children with incarcerated parents. A related research project is examining teacher's perceptions of children with incarcerated parents.

Dr. Dallaire comments on some of her preliminary findings. "There are not many differences in the risks children face when they have a mother in prison in comparison to having a father in prison," said Dr. Dallaire. She

notes that this is an interesting finding because "we are seeing more negative outcomes for adult children whose mother was incarcerated, specifically they are more likely to be imprisoned themselves compared to those whose father was imprisoned." Thus far, the adjustment and functioning of children with incarcerated parents appears to be not as positive as average children. However, as a group, children with incarcerated parents are not scoring in the clinical range.



Ann B. Loper, Ph.D.

Ann Booker Loper, Ph.D. is a professor in the Clinical and School Psychology program at the Curry School of Education at the University of Virginia. Dr. Loper researches adjustment patterns of women in prison, with a particular emphasis upon how the stress of being an incarcerated mother affects the ability to cope with prison. In an initial study of parenting stress, 362 female state prisoners completed measures of their concerns about parenting, as well as measures of mental and behavioral adjustment. Not surprisingly, results showed that inmate mothers experience high stress, particularly in terms of their own sense of competence as a parent. Many factors were associated with this high stress. While most of the inmates (75.5%) had daily contact with their children prior to incarceration, they rarely saw these children during visitation. Approximately 70% of the inmates received visits less than once a month. This stress was particularly acute for the approximately 25% of the sample who feared that they would have difficulty regaining child custody after release.

The parenting stress experienced by these inmates was not an isolated experience. Inmates who reported high levels of parenting stress were more likely to experience anxiety, depression, and somatic symptoms. In addition, inmates with high levels of parenting stress had more difficulty adhering to prison rules. Higher levels of parenting stress were associated with commission of more infrac-

tions, and infractions of higher severity. Results underscore the difficulty for an inmate mother who is highly stressed about her own role as a mother to be a good citizen of the prison.

Other research conducted by Dr. Loper and her students explored whether certain types of communication between inmate mothers and children are particularly beneficial in reducing parenting stress. Visits are generally very rare and far apart for most inmates and thus are not able, by themselves, to sustain a reduction in parenting stress. The brevity of the visits, institutional constraints on touching, and the typically unrealistic expectations for these infrequent encounters can sometimes result in even more stress for the inmate mother and her children. However, there are other fruitful avenues for contact, such as telephone calls, letters home, and contact with caretakers. Dr. Loper explains, "We found that while all forms of contact can help to reduce parenting stress in prison, letter writing seems to have the biggest punch. While an inmate mother may not be able to control frequency of child visits, whether her child will be reachable via the phone, or when they can talk with a caretaker, she can pick up a pen at any time and write a letter expressing her love."

Dr. Loper is continually collecting data to be used to evaluate the curriculum, *Parenting on the Inside*, described on page 9. A new initiative is a modification of the curriculum to enable its use with other correctional groups. Dr. Loper is piloting a version of the training with jail inmates this year, and exploring how this different context should be taken into account. In addition, Dr. Loper is initiating studies examining parenting stress among fathers. Many fathers in prison, unlike mothers in prison, were not primary caretakers prior to incarceration. Dr. Loper will seek to determine whether there are differences in the stressors associated with being an incarcerated father versus being an incarcerated mother, and if so, whether there are different concomitant adjustment patterns. Dr. Loper hopes that her work will inform correctional professionals how to best work with mothers and fathers in correctional setting so that they can build healthy bonds with their children.

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### ***Can We Really Parent from Prison? Information for Parents in Prison,*** by Sue Kennon, M.S., 2007, 43 pages.

MOMS, Inc. (Incarcerated) Parenting Program, Instructor Handbook, by Sue Kennon, M.S. & Peg Ruggiero, M.Ed., MSW, 2003, 120 pages.

Available from: Sue Kennon, Parenting Education Coordinator, Virginia Department of Correctional Education, Virginia Correctional Center for Women, P.O. Box One, Goochland, VA 23063 (804) 784-3582 E-mail: skliberty@msn.com

*Can We Really Parent from Prison?* is a handbook for incarcerated parents. It offers information, advice, and techniques for parents to continue to communicate with their children while in prison. Sample letters to children, to social workers, and to attorneys are included. It can be used as a "stand alone" resource or as an adjunct to the MOMS, Inc. Parenting Program. MOMS, Inc. is described in the spotlight, page 16. The curriculum is detailed and is modified for the special needs of parents who are in prison.

# Kinship Care

*Jessica, age 8, lives with her grandmother. Last week she came home from school crying. Two children on the bus said her mother was “a crack head.” Jane doesn’t know what that means but she senses that it is something bad. She asks her grandmother if her mother is “a crack head.”*

*Sam and Jeremy had always been “in and out” of their grandmother’s home. Their mother was addicted to substances and often lacked housing. Grandma always allowed them to stay. When their mother was arrested, Sam and Jeremy went to live with their grandmother.*

*Anton, Shauna, and Letisha were visiting an aunt for the weekend. Shauna explained, “We were supposed to stay just two days. We were shocked when mama didn’t return. We just ended up staying.”*

## What is Kinship Care?

Kinship care is when a relative or another person close to a child assumes primary responsibility for raising that child. Kinship care occurs for many reasons. It may be that children enter kinship care due to a parent’s incarceration. It may also be the case that grandparents and relatives are helping care for and raise children because parents are physically disabled, impaired due to substance abuse or mental illness, involved in job-related travel, or cognitively impaired. Other reasons cited include death of a parent, divorce, teen pregnancy, military deployment, and domestic violence issues (Goyer, 2006).

There are several types of kinship care identified in the literature. In formal kinship care (sometimes called kinship foster care), the child(ren) are placed with the relative by a child welfare agency that has custody of the children. The children remain under the supervision of that agency. In this option, the relatives must meet the same standards as any foster family. In some states, including Virginia, formal kinship care means that the family will receive a foster care payment through the state for the care of the child and the children qualify for medical care (NAIARC, 2004).

Voluntary kinship care refers to situations where the child lives with relatives and the child welfare system is involved but does not assume custody of the child(ren). There may or may not be juvenile court involvement. Several situations can lead to voluntary kinship care. One possibility is that child welfare workers find evidence of child maltreatment but the evidence is not sufficient to support

the children coming into state custody. A voluntary arrangement between the relatives, the parents, and child welfare is achieved. Another example is a parent who places children with relatives while they are in treatment for substance abuse or mental illness. A third circumstance is where parents agree to a voluntary placement in order to avoid a court hearing to determine whether or not they can retain legal custody (USDHHS, 2005). According to studies cited by Messing, 2005, the number of voluntary kinship care placements is approximately one and a half times greater than the number of formalized kinship care placements.

Informal kinship care (sometimes called private kinship care) occurs when there is no agency or juvenile court involvement. The arrangements are between family members. The family and child are not monitored by anyone but they also do not receive any monetary compensation from foster care funds nor are they eligible for the services that children in foster care receive. Also, the parent retains custody and can legally resume care of the children at any time. The kin caregiver may have difficulty enrolling children in school, obtaining health insurance, and authorizing medical care (NAIARC, 2004; USDHHS, 2005). According to studies cited by Messing (2005), most children in kinship care (about two-thirds) are in private kinship care and have not come to the attention of child welfare agencies.

Most grandparents who are raising their grandchildren are doing so informally, without legal relationships such as custody or guardianship. Ehrle & Green (2002) reported that 89% of grandparents were raising the children informally (reported in Day & Cross, 2004). Many grandparents who eventually obtain custody experience a period of informal care as well.

Finally, some children in kinship care are adopted by their relative or the relative is granted legal custody or guardianship (NAIARC, 2004). Custody or guardianship means suspending the parent’s legal rights but not terminating them. Legal guardianship gives grandparents or a relative both physical and legal custody of the children. Caretakers with custody or legal guardianship have the same decision-making rights as custodial parents except as limited by the court (Day & Cross, 2004). Thirty-five states offer subsidized guardianship or financial assistance to the families. The payment is typically greater than Temporary Assistance for Needy Families but lower than foster care payments (sources cited in Day & Cross, 2004).

Adoption is secure and permanent. Parental rights are terminated either voluntarily or by court order. The adoptive grandparents or kin then assume sole responsibility for the chil-



dren (Day & Cross, 2004). If the child had been in foster care, there may be state adoption subsidies available through the child’s 18th birthday.

## Policies on Kinship Care

A number of federal laws support the concept that kin are preferred as caregivers for children. **The Indian Child Welfare Act of 1978** stated that Native American foster children should be placed with extended family and near their home if possible. **The Adoption Assistance and Child Welfare Act of 1980** required states to place children in the least restrictive and most family-like setting available (Morse, 2005). By 1992, twenty-nine states required foster care agencies to give preference to the relatives of foster children and 44 states commonly placed children in kinship care (U.S. GAO, 1995, cited in Morse, 2005).

In the 1990’s two additional pieces of federal legislation strengthened the emphasis on kinship care. **The Personal Responsibility and Work Opportunity Act of 1996** required states to give preference to kin when determining child placement as long as the relative meets the state’s child protection standards. **The Adoption and Safe Families Act of 1997** acknowledged the unique position of kinship care. AFSA allows states to seek federal reimbursement for kinship foster care expenses if the kin meet the same foster care licensing standards as non-kin, on a case-by-case basis (Morse, 2005).

It is estimated that as many as 19,250 children currently in foster care could exit the foster care system with legal custody transferred to relatives. However, relatives would experience considerable financial hardships, as legal custody or guardianships may require relinquishing public support and medical and mental health care provided through Medicaid (Lester & Vamvas, 2007). Several states have partially addressed this issue by developing subsidized legal guardianship programs. According to Lester & Vamvas, they are underfunded and thus participation is limited.

**The Kinship Caregiver Support Act** was introduced to the Senate in May, 2005 but no action was taken. It was introduced again in 2007. It establishes a Kinship Navigator Program to help link relative caregivers to a wide range of services and supports. The Kinship



Guardianship Assistance Program will allow states to use federal funds for subsidizing guardianship payments to relative caregivers who commit to permanently caring for children once reunification and adoption are “ruled out.” To be eligible for the program, a child must be in foster care and under the care of a state agency for at least the past year. The child must demonstrate a strong attachment to the prospective relative guardian. In the case of children 14 years and older, the child must be consulted about the kinship care arrangement. States are required to provide a notice of the removal of a child to all grandparents and other adult relatives within 60 days. The Act also will allow states to establish separate licensing standards for relative foster parents.

The cost of the Kinship Caregiver Support Act has not been officially estimated. Given the commitment of the House and Senate to restoring fiscal discipline, the legislation may be challenging to pass (Lester & Vamvas, 2007).

### Incidence of Kinship Care

According to the 2000 U.S. Census, nationally there are 4.5 million children under the age of 18 living in grandparent-maintained households and another 1.5 million children under 18 living in other relative-maintained households (U. S. Census Bureau, 2002, cited in Generations United, 2003). The 4.5 million children are 6.3% of all children under age 18. The 1.5 million children are 2.1% of all children under age 18. From 1990 to 2000, the number of children in kinship care increased 30% (AARP, 2005).

Nationally, 2.4 million grandparents report they are raising their grandchildren. Of these,

29% are African-American; 17% are Hispanic/Latino; 2% are American Indian or Alaska Native; 3% are Asian; and 47% are Caucasian. About 19% live in poverty. Many grandparents are still working or re-entered the work force in order to try to support the children (Goyer, 2006).

Another way of examining the data is to consider what percentage of all children are being raised by grandparents. Of all children, 6.3% are being raised by grandparents. Thirteen percent of all African-American children; 8% of Hispanic children; and 4% of Caucasian and Asian children are being raised by grandparents. Large proportions of Native American children are in grandparent care, with some tribes estimating that up to 60% of children are in this living situation (Goyer, 2006).

In Virginia, there were 107,602 children living in 59,464 grandparent-headed households in 2000. That is 6.2% of the children in the Commonwealth. In Virginia, an additional 31,076 children live in households headed by relatives other than grandparents (1.8% of all children in the Commonwealth). Forty percent of the grandparents are African-American; 3% are Hispanic/Latino; 3% are Asian; and 52% are Caucasian.

In Virginia, as of December 31, 2006, there were 8,150 children in out-of-home placements under the supervision of the Virginia Department of Social Services. Of these children, 372 were placed with kin. Virginia’s policy requires that kin be considered first when an out-of-home placement is sought for a child under the Department’s care. In Virginia, kinship care providers must meet the same approval standards and receive the same foster care payment as non-related foster parents.

### How Does Child Welfare Become Involved?

There are many ways that child protective services or child welfare may become involved with children who are ultimately placed in kinship care. These include:

- a report of abuse or neglect is made;
- parents are arrested;
- parents die;
- a parent leaves a child with a relative and does not return;
- relatives caring for children are unable to continue to do so;
- parents relinquish children due to their own illness;
- parents no longer want custody of their children.

If child welfare becomes involved, case-workers have several responsibilities and offer several services. Workers will need to monitor the child to be certain that safety is maintained. Workers provide referrals and in some cases also pay for services or arrange transportation to services. If the child is to visit the parents, the caseworker will arrange the visits and in some cases will monitor them and provide transportation. The agency may be able to provide counseling services and respite care.

Financial support is sometimes available to those caring for a relative’s children. TANF (Temporary Assistance to Needy Families) provides financial assistance to families while helping them become self-sufficient. There are also “child-only” TANF grants. Food stamps are available to families with incomes

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## Spotlight: Virginia Kinship Care Initiative Statewide Task Force & Information Network

Virginia Kinship Care Initiative Statewide Task Force & Information Network was founded in 2000 with funding provided by the Brookdale Foundation. The Task Force is facilitated by the Virginia Department for the Aging (VDA) located in Richmond, Virginia. The VDA’s goal is to “foster independence, security, and dignity of older Virginians by promoting partnerships with families and communities.” Part of this mission is supporting grandparents and other relatives who are raising children in Virginia.

The VDA has published a useful handbook called *Grandparents Caring For Grandchildren: A Resource Guide*. The guide provides information about legal issues, financial assistance, and other resources needed for grandparents providing kinship care. The guide is free from the VDA’s website and it is distributed to most local kinship care agencies (<http://www.vda.virginia.gov/pdfdocs/Grandparents.pdf>).

Ellen Nau is the Task Force facilitator of the

Kinship Care Initiative. She explains that the Task Force does not offer direct services to individuals, but they work collaboratively with kinship care providers in Virginia and with academic institutions that conduct kinship care studies. The Kinship Care Initiative Statewide Task Force’s work with the Virginia Department of Social Services (DSS) has helped reform Virginia’s written law (the *Code of Virginia*) to include a definition of kinship care. The *Code of Virginia* now also requires local boards of social services “to consider kinship care as an alternative to foster care placement if it is in the child’s best interest.” Additionally, in 2005 the collaboration between DSS and the Task Force led to Virginia legislation allowing grandparents to be issued a copy of a certified birth certificate of a child when there is evidence of need.

Virginia Kinship Care Initiative Statewide Task Force also promotes information sharing among kinship care providers by holding Task Force meetings. These meetings utilize video

conferencing to encourage participation from any kinship care group in Virginia. These statewide groups can use their own video conferencing services to participate in meetings or use services available at local Virginia Department of Health (VDH) offices. Meeting times can be found on the Virginia Department for the Aging website.

The Kinship Care Initiative Statewide Task Force is currently collaborating with the Virginia Association of Foster, Adoptive, and Kinship Families. In the future, the Task Force is hoping to increase state funding for children’s benefit programs that assist kinship care families.

Contact: Ellen Nau, Task Force Facilitator,  
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## Foundation for Grandparenting

The Foundation for Grandparenting is a non-profit, tax-exempt corporation, which was created in 1980. The goal of this organization is to help grandparents become more aware of parenting techniques and how to be a better grandparent in order to help themselves, the parents, the children, and the community. The Foundation of Grandparenting accomplishes these goals through education, research, communication, networking, and programs.

The first national conference for grandparenting was held in 1992, and the first international conference was held in New York during May of 2007. Participants came from five continents to listen and learn about what it is like to be raising children as a grandparent. Issues such as barriers encountered, best practices, and laws that can help grandparents and kinship caregivers were also discussed. On the final day of the conference, an international coalition was created and they voted on a set of resolutions that declared the rights of grandparents, kinship caregivers, and the children.

There are many programs and camps that the Foundation of Grandparenting has developed and organized. With the help of the St. Francis Academy, a "clinical grandparenting" program was created which allows grandparents to be a clinical ally, a family historian, and a resource for grandchildren. Another program that is sponsored by this organization is the grandparent-grandchild summer camp. This allows local and long-distance grandparents to become closer to their grandchildren. Finally, many research projects are being conducted about grandparenting and are published in their newsletter called "Vital Connections." The website provides numerous links to information about grandparenting, classes, and research.

More information is available from: Foundation for Grandparenting, 108 Farnham Road, Ojai, CA, 93023  
E-mail: [gpfound@grandparenting.org](mailto:gpfound@grandparenting.org)  
Web site: <http://www.grandparenting.org/>

## AARP

Formerly called the American Association of Retired Persons, AARP is a nonprofit membership organization of persons 50 and older dedicated to addressing their needs and interests. Since its inception in 1958, AARP has promoted independence, dignity, and purpose for older persons. AARP aims to enhance the quality of life for older persons and to encourage older people "To serve, not to be served." Membership in AARP is open to any person age 50 or above, whether or not retired or a United States citizen. With over 39 million members, AARP is the leading nonprofit, nonpartisan membership organization for people age 50 and over in the United States.

AARP's website has a Grandparent Information Center (GIC) that provides a host of resources to help grandparents raising their grandchildren. The GIC contains articles and resources dealing with legal issues, health care, and taxes. AARP also has a Benefits QuickLINK online tool that can help grandparents or other relatives raising children connect with key public benefits programs for which they or the children they are raising may be eligible.

AARP Foundation Grandparent Information Center, 601 E Street, NW, Washington, DC 20049  
888-687-2277, FAX: 202-434-6466  
E-mail: [gic@aarp.org](mailto:gic@aarp.org)  
Web site: <http://www.aarp.org/families/grandparents/gic/a2004-01-16-grandparentsinfocenter.html>



## Kinship Care

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below a certain level. SSI (Supplemental Security Income) may be available to children and to caretakers who are disabled. Health insurance can be obtained for some children in kinship care through either Medicaid or through CHIP.

In addition to foster care benefits and other benefits described above, some states have subsidized guardianship programs. Most of these programs offer ongoing subsidies to children who have left foster care to live permanently under the legal custody or guardianship of relatives.

## Characteristics of Caregivers

Nearly two-thirds of relative caregivers are grandparents (Harden, Clark, & McGuire, 1997). Of these, nearly 85% are grandmothers. The majority (71%) of grandparents are under age 60 and many are still working (Goyer, 2006).

The demographics of kin caregivers suggest that the primary motivation for assuming care of the children is a factor other than self-interest. Relative caregivers are more likely than non-relative foster parents to be poorer, older, and have less formal education. They are also more likely to be employed outside the home, have more health problems, and

have less income. Additionally 85% of the caregivers are female (Morse, 2005; studies cited in Messing, 2005; studies cited in National AIA Resource Center, 2004). For example, a sample of 1,095 kin care providers in a national survey (Earle, Green & Clark, 2001, cited in Messing, 2005) found 41% were below the federal poverty level and 36% had less than a high school degree. Their income was less than two-thirds of the income of non-relative caregivers.

According to research by the AARP in 2003, grandparents are uninformed and inadequately educated about services, benefits, and resources available to them. Grandparents who were members of minorities were less informed and more isolated (Goyer, 2006).

## Consequences of Kinship Care

### Potential Advantages

The potential advantages of kinship care are many. Family ties are maintained and even strengthened when children are cared for by relatives rather than strangers. Children in care of kin are more likely to have regular contact with their parent(s) than children in traditional foster care and those contacts are more family-like and informal. Kin are more likely than regular foster parents to care for large sibling groups. This can be an advantage, as children are not separated and have the opportunity to stay in contact with family. Even if siblings are in different homes, sibling contact is significantly greater if the children are with relatives (62% maintaining visits compared to 30% of children placed with non-relatives, according to studies cited in Generations United, 2007).

Children may be comfortable in their relative's home and the transition may be much easier than the transition to a regular foster home. In some cases, the children do not have to change schools or even neighborhoods (Generations United, 2007; studies cited in



## Grandparents Raising Their Grandchildren: What to Consider and Where to Find Help, 1993, 8 pages, free of charge

Available from: AARP Grandparent Information Center, 601 E Street, NW, Washington, DC 20049 (202) 434-2296 or 800-424-3410, Fax: (202) 434-6474 e-mail [gic@aarp.org](mailto:gic@aarp.org) Web site: [www.aarp.org/grandparents/](http://www.aarp.org/grandparents/)

This publication gives grandparents information about legal issues, financial issues, child care, medical insurance, academic needs, and emotional adjustment for grandchildren they are raising.



Messing, 2005; Smith & Morton, 1999). For example, in California, 62% of children placed with relatives live within five miles of their home of origin, compared to 36% when children were placed with non-relatives. In Illinois the figures were 40% of children within five miles of their home of origin when placed with relatives compared to only 21% when children were placed with non-relatives (studies cited in Generations United, 2007).

Children may feel little stigma in a relative's home compared to being in foster care, especially if they know other children who are also being raised by relatives. Kinship care placements tend to last longer and be more stable than placements in foster care (Generations United, 2007; Messing, 2005).

If the parent is eventually able to assume care for the child(ren), the transition into the parent's home can be more gradual and natural than the transition from foster care to the parent. The parent may even be able to move in with the family for a time before establishing a separate residence.

There has been concern that perhaps relatives of those who maltreat children might exhibit similar child-rearing patterns. However, according to Generations United (2007), children in kinship foster care appear to be as safe as or safer than those with non-relative foster families.

Placements with relatives are more stable than placements in the regular foster care system (Generations United, 2007; Messing, 2005). Relatives are often motivated to assume permanent care when reunification with the parent is not possible. However, the stability of relative placements can change over time. According to Testa (2001, cited in Messing, 2005), after three years kin and non-kin care share approximately the same risk for disruption. As children age, so do the caretakers and the risk for disruption increases (National AIA Resource Center, 2004).

### Potential Disadvantages

Caring for grandchildren or a relative's children is a source of stress. The initiation of the care arrangement is likely to be sudden and unplanned. Kin caregivers are often less prepared than regular foster parents to assume custody of children in the midst of a crisis. They are hindered by a lack of resources and a lack of social support.

Grandparent caregivers rate themselves as significantly more distressed and have poor psychiatric health compared to normative data. In one sample, 28.4% achieved scores in the clinical range. A study of 25 Virginia kinship caregivers (MacKintosh, Myers & Kennon, 2006) found that about a third had parenting stress levels above the 90th percentile. Lack of resources, poor health, and lack of social support account for much of the distress. A consistent finding is that kinship caregivers are less well resourced than foster parents. For example, a study by Ehrle & Green (2002) found that caregivers who are relatives are more likely to be single, poorer, older, and have less formal education than non-kin foster parents. These findings are similar to a survey of 246 kin and 344 non-relative caregivers by Berrick, Bath, and Needell, 1994 (reported in AIA, 2006).

Grandparent caretakers have additional issues. Kin can be approved as caregivers despite health problems. When youth are the most active in teenage years, grandparents may be unable to drive them to activities, may fall asleep early in the evening leaving the youth unsupervised, and may be unable to assist and support the youth's academic growth. Children worry about their grandparent becoming ill and dying. Children may have to assist caregivers who have health difficulties and even watch as they decline and die.

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### CWLA Kinship Care Best Practice Guidelines

Agencies seeking guidance on best practice standards for Kinship Care can consult this document. Some of the best practice points are summarized below:

- Whenever possible, child welfare agencies should provide financial benefits to kinship caregivers to support their care of vulnerable children. Beyond direct support, the agency should endeavor to educate the caregivers about benefits and support for which they are eligible.
- Family assessments can assist in service planning. The initial assessment focuses upon safety, protection and the immediate health, educational, developmental and emotional needs of the child(ren) and the willingness and ability of the kinship family to meet those needs. If possible, the assessment should include input from both parents, the child(ren), the potential caregivers and other significant persons.
- Assessment of the parents should be comprehensive and identify strengths, resources, and problems.
- Assessment of children should be comprehensive and identify strengths, challenges and relationships held between the children and the adults in their environment with emphasis on how to support those relationships.
- Policies and procedures should emphasize providing supports that are child-centered, family-focused, culturally responsive, and tailored to the needs of the family. A range of services are needed.
- Service plans should be implemented jointly with the family and other service providers, as needed.
- Rights and responsibilities should be clearly delineated.

Extracted from: Best Practice Guidance, <http://www.cwla.org/programs/kinship/bestpractice.htm>

More detailed information is available from CWLA Standards of Excellence for Kinship Care Services

## Spotlight: KinCare Program

For the past 8 years, Mountain Empire Older Citizens, Inc. (MEOC) has operated the KinCare Program. The program serves grandparents and other relatives who are raising children in Lee, Scott, and Wise counties and in the city of Norton. MEOC started the program in 1999 in response to the large number of grandparents in southwest Virginia who were raising grandchildren because the parents were struggling with substance abuse, mental health problems, or other issues. The program initially received a grant from the Brookdale Foundation.

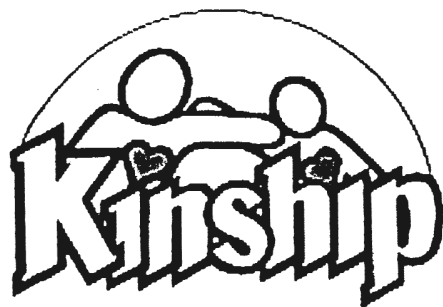
Jane Dockery, Director of Children's Services, says that the KinCare program conducts needs assessments of kinship care givers and provides them with information and referrals. They offer monthly support groups at each MEOC KinCare location and offer crisis in-

tervention. Volunteers conduct follow up calls with caregivers and provide transportation to KinCare activities. KinCare sponsors a number of Family Fun events, including a Fall Celebration organized by a local Boy Scout group. The event has food and craft activities. In the summer, KinCare hosts a swim party for kinship care families. Another annual event is a Caregiver Luncheon close to Grandparent's Day to honor those who provide kinship care.

KinCare has a Toy Library that allows grandparents to borrow toys for their grandchildren. Each year, KinCare raises money from local businesses and provides children with gift cards to purchase school supplies. In December, donations are solicited for Christmas gifts. Additionally, children's books donated to KinCare are distributed to caregivers at the monthly support group meetings.

Dockery estimates that 100 to 175 families participate in the KinCare program annually. The number of children they assist ranges from 150 to 225 per year. All of the KinCare services are free. Dockery states, "It is amazing that we have been able to help so many people with only a part-time staff and pieced together funding. All of our efforts are made possible by the tremendous support from the community."

For more information contact: Patty Bailey, Program Director, Mountain Empire Older Citizens, Inc., Block I-A Industrial Park, PO Box 888, Big Stone Gap, VA 24219 (276) 523-4202 FAX: (276) 523-4208 E-mail: [pbailey@meoc.org](mailto:pbailey@meoc.org) Web site: [www.meoc.org/](http://www.meoc.org/)



## Kinship Care

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A kinship caregiver is more likely to accept larger sibling groups. While keeping children together is a goal, sibling groups can also be a disadvantage. The caregiver can be stretched trying to care for numerous children with diverse needs. Siblings may not be a support to each other but instead be in conflict. While foster families have no knowledge of prior family history, the kinship family brings with them a history of interactions and current dynamics with the parents. Thus, kinship care is not foster care but a complex extended family intervention with its own set of dynamics (Smith & Morton, 1999).

For example, a dysfunctional parent may be “in and out” of the relative’s home and the children’s lives. Children can experience continued anger and disappointment and even embarrassment due to the parent’s failure to progress and assume responsibility for their care. The kinship caregiver may not be able to set boundaries and enforce rules about contact between the parent and the child.

There is disagreement between sources about the status of children in kinship care compared to those in foster care. According to some researchers, children residing in kinship care experience fewer behavioral, educational and mental health problems than children in traditional foster care (studies cited in National AIA Resource Center, 2004). Other researchers (Chapman, Wells & Johnson, 2002) maintain that children in kinship care have greater difficulty.

### A Vulnerable Population

Children in kinship care are likely to have experienced trauma and maltreatment. Compared to children in foster care, they are more likely to live in poverty, less likely to have health insurance, and are less likely to receive assistance from agencies. These factors and others suggest that children in kinship care are a very vulnerable population (studies cited in Morse, 2005; NAIARC, 2004). Morse notes that there has been a “remarkable lack of research, attention and funding regarding the health needs of children in kinship care” (p. 2).

According to Morse’s review, 66% of children in kinship care have more than one medical problem, with the most frequent problems being asthma, dental issues, obesity, and skin abnormalities. Despite having a greater number of health problems than children in foster care, children in kinship care were less likely than children in foster care to receive medical care. As a group, they experienced inadequate primary care, fewer immunizations, and poor vision, hearing and dental care. Many lacked health insurance.

Other researchers agree about the increased vulnerability. Numerous researchers have found that children in kinship care have significantly greater problems than children in the general population, including higher incidence of developmental delay, physical disability, hyperactivity and poor sleeping patterns. Messing (2005; 2006) states, “while eight percent of the general child population faces three or more socioeconomic risks concurrently (such as poverty or a caregiver with less than a high school degree), over twenty percent of children in kinship care can be placed in this category” (p. 2). Still, compared to children in regular foster care, those in kinship care appear similar in developmental delay, academic difficulties, behavioral difficulties, health and mental health problems (studies cited in Messing, 2005; 2006).

### Challenges

Grandparents and relatives may encounter legal difficulties in obtaining preventative and necessary health care for their grandchildren. Some states require kinship caregivers to obtain court-ordered legal custody or guardianship in order to receive or maintain Medicaid or other state-supported children’s health insurance (Day & Cross, 2004).

Grandparents may be reluctant to seek public financial assistance. Their fear is that the children will be made wards of the state and that their placement with the grandparent will not be guaranteed (Day & Cross, 2004).

Schools may not allow the grandparents to enroll their grandchildren unless the grandparent has legal custody. Also, the grandparent may not be entitled to receive school records or give permission for school services (Day & Cross, 2004).

Grandparents and other kinship care providers can attempt to establish a legal relationship with the children. However, this action is time-consuming, expensive, and often painful. It can result in additional family strain and estrangement.

### Children’s Perceptions of Kinship Care

Jill Messing investigated how children in kinship care perceive their situations (Messing, 2005; 2006). She conducted focus groups with 40 children in the care of relatives. Most (30) had caregivers who were their legal

guardians. The remainder (10) were in informal care. The children ranged in age from 11 to 14 and had lived at least a year with their caregivers (mean length of stay was 7.54 years and longest length of stay was 12 years). The majority of the caregivers (80%) planned to raise the child into adulthood and only 6.7% believed that the child might return to the parent’s custody. The major reason for the kinship care was parental substance abuse.

This group of children had a high rate of educational and mental health needs. Caregivers reported that 65% of the children were depressed; 70% had ADHD; 70% had asthma; and over 75% had a learning disability.

Many of the children reported the transition to kinship care was not difficult. They were familiar with their relative. Most did not feel stigma or ostracism from peers. Many viewed kinship care as similar or the same as living with a parent.

Most of the children had contact with their mothers but were often disappointed in the contacts with her. Some of the relationships resembled sibling relationships rather than parent-child relationships. Relationships with fathers were largely absent and the children did not appear to expect a relationship with their fathers. Most expressed gratitude towards the caregiver. Most children felt that they were secure and in a permanent placement.

### Intervention

According to the AARP research (2003, cited in Goyer, 2006), grandparents and relative caregivers want “one-stop shopping”. There should be one place where a grandparent can go to receive counseling, assistance in completing forms and applying for benefits, legal advice, services for the children such as tutoring and mentoring, and information and referral. The Mountain Empire KinCare Program (see Spotlight, page 21) is one example of a comprehensive service. A listing of Virginia resources is included in this issue as well as a description of the Virginia Kinship Care Initiative.

*References Available Upon Request*

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## Virginia Resources for Kinship Care

Virginia Department for the Aging Kinship Care Initiative (see Spotlight, page 19),  
 Ellen Nau (804) 662-9340 Ellen.Nau@vdh.virginia.gov  
 Catholic Charities – non-denominational support services and legal services,  
 Joni Fonts (757) 625-2568 jfonts@cc-hr.org  
 Mountain Empire Older Citizens Inc. – comprehensive services for kinship caregivers in  
 Lee, Scott and Wise counties and the city of Norton (see Spotlight, page 21)  
 Patty Bailey pbailey@meoc.org  
 Brighton's Solid Rock, Inc., Portsmouth – support groups,  
 Reverend Clifford Benner (757) 393-0570 brocamez@aol.com  
 Rockingham Memorial Hospital, Harrisonburg – Grandparent Education and Support  
 Cindy Reeves (540) 433-4421 creeves@rhcc.com or  
 Millie Tirado mitirado@rhcc.com  
 Fairfax Area Agency on Aging –Betsy Pugin betsy.pugn@fairfaxcounty.gov



AdvoCare, Inc. is a non-profit organization working with incarcerated individuals and their families. The three main goals of AdvoCare are: to provide assistance to prisoners by educating them and assisting with employment referrals; to provide prisoners and their families information on legal issues that pertain to their loved one who is incarcerated; and to provide a periodic newsletter to those concerned with prison-related legal issues.

The overall effort of AdvoCare, Inc. is to “reduce crime through criminal justice reform” by teaching incarcerated parents how to improve parenting skills through mentoring and by connecting inmates with other resources. AdvoCare, Inc. can also help research case law and statutes for prisoners who may not have access to legal advice or may not understand all of the laws underlying their personal case. A quarterly newsletter is distributed among prisoners that informs them of other organizations which work to assist and educate prisoners about the legal system as well. The newsletter also contains information about pre- and post-release educational programs.

AdvoCare, Inc. has collaborated with Women in Transition for the project known as “Messages Project.” This service is supervised by founder Carolyn LeCroy. LeCroy was an award-winning media producer in television and advertising when an arrest for marijuana possession put her in a Virginia prison. Upon release, she traveled to Fluvanna Correctional Facility and with the assistance of the Virginia Department of Corrections, videotaped mothers in prison sending messages home to their children. These tapes were then mailed to the incarcerated mother’s families. LeCroy believes the taped messages are “a part of keeping the ever-so-important bond between a child and their parent.” The Women in Transition Program collaborates with AdvoCare Inc. and other groups to help promote videotaping across the Commonwealth, helping the children feel loved and “making a positive difference in the behavior of many children.” These videotaped messages are mailed three times a year: Christmas; Mothers Day; and Fathers Day. The program is funded by donations, as it costs about \$12.00 per tape to be recorded and mailed to each child of an incarcerated adult. Since 1999, the Messages Project has worked in six state prisons three times a year to create about 2500 tapes from parents to their children.

For more information contact:  
 Carolyn LeCroy, 9711 8th View Street #11,  
 Norfolk, VA, 23503. Or contact: AdvoCare  
 Inc., P.O. Box 133, Hancock, MD 21750-0133,  
 Call (202) 217-1623, Fax 202-204-6038,  
 Email: director@advocareflash.org or  
 Website: www.advocareflash.org.

## Generations United

Generations United (GU) is an intergenerational membership organization created for the benefit of grandparents who are in primary caregiver roles and their grandchildren. Since its conception in 1986, Generations United has focused solely on improving the lives of children, youth, and older people through intergenerational strategies, programs, and public policies. Generations United was originally created by the National Council on Aging and the Child Welfare League of America. The collaborative effort proved to be promising and the organization flourished. Within two years, AARP and the Children’s Defense Fund had joined the organization’s leadership effort. Consequently, GU grew to become a coalition of more than 100 national organizations seeking a shared, mutually supportive agenda.

In 1997, GU convened the first national expert sym-

posium on grandparents and other relatives raising children. In 1999, 2001, 2003, and 2005 GU held successful international intergenerational conferences attended by worldwide intergenerational organizations. In 2004, GU was awarded the Johnson & Johnson/Rosalynn Carter Institute Leadership Award for Excellence in Intergenerational Caregiving. GU provides a forum to explore areas of common ground while celebrating the richness of each generation and plans to continue to act as a catalyst for stimulating collaboration between organizations for aging and those serving children, and youth.

More information is available from: Generations United, 1331 H Street NW, Suite 900, Washington, D.C. 20005 (202) 289-3979, Fax: (202) 289-3952, Email: gu@gu.org, Website: www.gu.org.

## The Ties That Bind: Abuse & Kinship Care by Naomi Weinstein & Marianne Takas, 2001, 91 pages, \$7.00

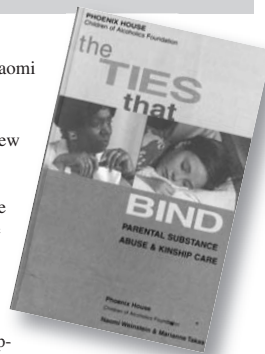
Available from: Phoenix House Children of Alcoholics Foundation, 164 W. 74th Street, New York, NY 10023 (212) 595-5810, E-mail: coaf@phoenixhouse.org Web site: www.coaf.org

This guidebook is written in simple English and is written for the kinship caretakers of the 2 million children who live with grandparents or other caretakers due to parental substance abuse. Raising a child of a substance abuser can be difficult and can present painful challenges. This guidebook can help.

The material is presented sensitively and with many examples. There are sections to help understand substance abuse and how it affects child development and family life. Both the child and the caregiver may have strong feelings of anger, sadness, loss, and ambivalence. Topics discussed include: how to set limits in relating to the child’s parents; how to explain to the child and talk about the addiction; how to reduce stress and preserve the caretaker’s marriage or relationships. A child’s behavior can be affected by a parent’s substance abuse. Caregivers are offered help in how to teach and discipline a child who is misbehaving and upset and how to create a peaceful household. The guide discusses visits and other contacts with addicted parents and how to keep visits safe and positive. How to “plant the seeds of sobriety” is yet another important topic as family members may fear that the children will also become addicted as they mature.

This easy-to-read guidebook appears ideal for a discussion tool for support groups, as an adjunct to therapy and counseling and as a tool that the grandparent or caregiver can use as a reference guide.

The book is accompanied by a packet of 25 Fact Sheets. Each fact sheet summarizes the important points of a section of the guidebook. They are written at a sixth grade reading level and each provides practical solutions for a single issue (such as dealing with the biological parents or learning to reinforce a child’s strengths). They are useful for therapists or home visitors to reinforce a single lesson or topic. For caregivers with limited time or limited reading skills, the Fact Sheets can be a guide to put on the refrigerator or keep in a handy location for reference. The Fact Sheets were developed by Lisa Huttering, Naomi Weinstein and Angela Zinzi (2001) and are available at a cost of \$10 per 25 fact sheets.



## Websites to Check

Child Welfare Information Gateway: [www.childwelfare.gov/adoption/types/families/kinship.cfm](http://www.childwelfare.gov/adoption/types/families/kinship.cfm)  
 AARP’s Grandparent Information Center: [www.aarp.org/families/grandparents/](http://www.aarp.org/families/grandparents/)  
 Child Welfare League of America: [www.cwla.org/programs/kinship/](http://www.cwla.org/programs/kinship/)  
 Family and Corrections Network – Children of Prisoners Library: [www.fcnetwork.org](http://www.fcnetwork.org)  
 Center for Children of Incarcerated Parents: [www.e-ccip.org](http://www.e-ccip.org)  
 Children’s Defense Fund: [www.childrensdefense.org/site/PageNavigator/policy\\_cw\\_kinship](http://www.childrensdefense.org/site/PageNavigator/policy_cw_kinship)  
 Generations United National Center on Grandparents and Other Relatives Raising Children: <http://ipath.gu.org/Natio991336.asp>  
 Grandparents Raising Grandchildren fact sheets: [www.fcs.uga.edu/ext/pubs/fam/grandparents.php](http://www.fcs.uga.edu/ext/pubs/fam/grandparents.php)  
 Through the Eyes of a Child – Grandparents Raising Grandchildren series: [www.uwex.edu/relationships/](http://www.uwex.edu/relationships/)  
 Grandparents Raising Grandchildren (Full Circle of Care): [www.fullcirclecare.org/grandparents/grandparents.htm](http://www.fullcirclecare.org/grandparents/grandparents.htm)  
 GrandsPlace: [www.grandsplace.org](http://www.grandsplace.org)  
 Grandparent Again: [www.grandparentagain.com](http://www.grandparentagain.com)  
 Foundations of Successful Youth Mentoring: A Guidebook for Program Development  
[www.nwrel.org/mentoring/pdf/foundations.pdf](http://www.nwrel.org/mentoring/pdf/foundations.pdf)



## Children of

## Incarcerated Parents

*continued from page 8*

makes the collaboration worthwhile. Reverend Mark Scott, Director of the Faith and Service Technical Network of the National Crime Prevention Council remarks, "Religious communities are voluntary assemblies of citizens. They believe love can heal wounds and are bold enough to try."

### How Effective are Services/ What is Still Needed?

Other than the findings on mentoring, discussed above, only a few empirical studies were located that examined the effectiveness of services. Springer, Lynch & Rubin (2000) measured changes in self-esteem in children of incarcerated parents attending a 6-week intervention. The results were equivocal.

Loper and Tuerk (2006) reviewed 17 stud-

ies of parent education programs in prisons. They note that measures of parenting are indirect, since parents are not in contact with their children. Typically researchers measure changes in self-esteem, parenting attitudes, and institutional adjustment. Changes in these areas are hypothesized to relate to changes in parenting behavior. Loper and Tuerk concluded that there was limited support for a connection between participation in a parenting program and increased self-esteem. Some studies found positive changes in parenting attitudes, suggesting that interventions can improve parenting attitudes. Studies on institutional adjustment had mixed results. Parents who are less stressed about their children may be better institutional citizens and more amenable to rehabilitation efforts, but more study is needed. Loper and Tuerk also describe "encouraging initial evidence" (p. 417) of qualitative changes in the self-esteem of children of inmates after the incarcerated parent's participation in parenting classes.

The Annie E. Casey Foundation conducted needs assessments in Maryland, New York and Alabama to learn more about the service needs and challenges faced by persons who assist children of incarcerated parents. Their findings documented the inadequacies of current support systems for parents and children.

There is a great need for stable living arrangements and support for caretakers. There is not adequate support for visitation. Women leaving the correctional system face difficult transitions with inadequate assistance. Regular collaborative case conferences could assist in service delivery and case management.

The Brennan Center for Justice (Allard & Lu, 2006) reviewed "opportunities for improvement" in efforts to reunify families with children in foster care and incarcerated parents. They suggest a number of practices including intensive treatment for substance abuse and diversion programs to avoid incarceration altogether. For parents who are already incarcerated, they endorse a set of procedures allowing greater involvement of the parent in their children's lives.

It is clear that children with incarcerated parents are, as a group, an at-risk population. Support programs and mentoring for children show promising results. However, it is not sufficient to simply offer assistance to the children. Children do well when their families do well (Slavin, 2004). Interventions for children of incarcerated parents need to support not only children, but their families as well.

*References Available Upon Request*

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